02/20/2008 10:49

Image# 28930608631

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston ٧A 20191 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00343459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2008 0 1 3 1 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR Milton Guiberteau Type or Print Name of Treasurer Electronically Filed by DR Milton Guiberteau 02 20 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American College of Radiology Association D D " D 0 1 0 1 2008 0 1 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2008 398231.39 January 1 (b) Cash on Hand at 398231.39 Begining of Reporting Period 167116.38 167116.38 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 565347.77 565347.77 6(a) and 6(c) for Column B) 26924.52 26924.52 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 538423.25 538423.25 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name American College of Radiology Association

Report Covering the Period:

м м 0 1 From:

01

2008

М М 0 1

^D 3 1

^y 0 0 8

I. Recei	ots	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other that (a) Individuals/Persons	Other		
Than Political Com (i) Itemized (use \$	mittees Schedule A)	146935.60	146935.60
(ii) Unitemized		19197.55	19197.55.
(iii) TOTAL (add Lines 11(a)(i) a	and (ii)	166133.15	166133.15
(b) Political Party Com	mittees	0.00	0.00
(c) Other Political Com(such as PACs)(d) Total Contributions		0.00	0.00
11(a)(iii),(b) and (c) Totals to Line 33, p) (Carry age 5)	166133.15	166133.15
Transfers From Affiliate Party Committees		0.00	0.00
3. All Loans Received		0.00	0.00
4. Loan Repayments Rece 5. Offsets To Operating Ex		0.00	0.00
(Refunds, Rebates, etc. (Carry Totals to Line 37, 6. Refunds of Contribution	page 5)	0.00	0.00
to Federal candidates ar Political Committees	nd Other	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc)	983.23	983.23
B. Transfers from Non-Fe			
(a) Non-Federal Accourt (from Schedule H3		0.00	0.00
(b) Levin Funds (from S	Schedule H5)	0.00	0.00
(c) Total Transfer (add	18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Line 12, 13, 14, 15, 16, 17, a		167116.38	167116.38
Total Federal Receipts (subtract Line 18(c) from	n Line 19)	167116.38	167116.38

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. 0	perating Expenditures:) Shared Federal/Non-Federal		
(a	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
	Expenditures	0.00	0.00
(c	Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2. Tr	ransfers to Affiliated/Other Party	0.00	0.00
C	ommittees	0.00	0.00
3. C∈ F∈	ontributions to ederal Candidates/Committees	05500.00	2550000
	ederal Candidates/Committeesd Other Political Committees	25500.00	25500.00
	dependent Expenditure se Schedule E)	0.00	0.00
5. C	pordinated Expenditures Made by Party		
(u	ommittees (2 U.S.C. 441a(d)) se Schedule F)	0.00	0.00
6 I	oan Repayments Made	0.00	0.00
O. LC	an repayments wade		
	pans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
(b) Political Party Committees	0.00	0.00
(c	,	0.00	0.00
, ,	(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (b))		
9. O	ther Disbursements	1424.52	1424.52
0 F	ederal Election Activity (2 U.S.C 431(20))		
	a) Shared Federal Election Activity		
`	(from Schedule H6)	0.00	2.22
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely		
,	With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
·	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. –			
	otal Disbursements (add Lines 21(c), 22,	26924.52	26924.52
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	20324.32	20924.32
2. T	otal Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)		
(3		26924.52	26924.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	166133.15	166133.15
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	166133.15	166133.15
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(1)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 98 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asset		ress or any political committee it	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mark McVee			Date of Receipt
Mailing Address PO Box 4426			0 1 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 23040143
<u>Soldotna</u>	AK	99669-4426	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Central Peninsula General	Occupation	n c Radiologist	
Hosp Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	riggregate	500.00	
Full Name (Last, First, Middle Initial) Dr. Palmer Blakley	I		Date of Receipt
Mailing Address 8148 Edgebrook Ln			0 1 0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23040146
Tinley Park	IL	60487-7011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Associated Radiologists/J- oliet	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Dumler	_		Date of Receipt
Mailing Address 15910 Arkdale Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23040147
Spring	TX	77379-6806	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Houston Radiology Associa- tes	Occupation Diagnost	n c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
SUBTOTAL of Receipts This Page (optional))		1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 98 (check only one) X 11a
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation	
	Full Name (Last, First, Middle Initial) Dr. Marc Gollub		Date of Receipt
	Mailing Address 44 W 62nd St Apt 26		01 09 2008
	City New York	State Zip Code NY 10023-7013	Transaction ID: 23040158
	FEC ID number of contributing federal political committee.	C 10025-7015	Amount of Each Receipt this Period 365.00
	Name of Employer Mem Sloan-Kettering Cancer Ctr	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
. –	Full Name (Last, First, Middle Initial) Dr. Perry Cook		Date of Receipt
	Mailing Address Wind River Radiology 295 Garfield St	/	01 09 2008
	City	State Zip Code	Transaction ID: 23040160
	Lander	WY 82520-3121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Wind River Radiology	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
_	Full Name (Last, First, Middle Initial) Dr. Alfio Pennisi	_ I	Date of Receipt
	Mailing Address South Jersey Rad As 1307 White Horse Ro		01 09 7 2008
	City	State Zip Code	Transaction ID: 23040161
	Voorhees FEC ID number of contributing federal political committee.	NJ 08043-2100	Amount of Each Receipt this Period 500.00
	Name of Employer South Jersey Rad Assoc PA	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
Γ			1265.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 98 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any personal statements may not be sold or used by any personal the name and address of any political committee to ociation	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kimberly Applegate Mailing Address 640 Morningside Ct City Zionsville FEC ID number of contributing federal political committee. Name of Employer Riley Hospital for Children Receipt For:	State Zip Code IN 46077-1901 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Michael Weiner	1000.00	Date of Receipt
Mailing Address Meritcare Medical C 737 Broadway City Fargo FEC ID number of contributing federal political committee. Name of Employer Meritcare Medical Center Receipt For: Primary General Other (specify)	State Zip Code ND 58102-4421 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 365.00	Transaction ID: 23040368 Amount of Each Receipt this Period 365.00
Full Name (Last, First, Middle Initial) Dr. Gregg Franklin Mailing Address 12700 Desert Sky A City Albuquerque	State Zip Code NM 87111-8042	Date of Receipt M M M O 1 0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer New Mexico Cancer Center Receipt For: Primary General Other (specify) ▼	Occupation Radiation Oncologist Aggregate Year-to-Date 250.00	250.00
SUBTOTAL of Receipts This Page (optional)	1615.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 98 (check only one) X 11a 11b 11c 12
I	Any information copied from such Reports and S	tatomonto ma		13 14 15 16 17
	or for commercial purposes, other than using the	name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation		
Α.	Full Name (Last, First, Middle Initial) Dr. John Cucinotta			Date of Receipt
	Mailing Address Crouse Hosp 736 Irving Ave City	State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Syracuse Syracuse	NY	13210-1687	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Crouse Radiology Associat- es	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Barbara Robins			Date of Receipt
	Mailing Address 244 Derwen Rd	01 09 2008		
	City	State	Zip Code	Transaction ID: 23040375
	Merion Station FEC ID number of contributing federal political committee.	C	19066-1229	Amount of Each Receipt this Period 250.00
	Name of Employer FCMC Radiology Associates	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
C.	Full Name (Last, First, Middle Initial) Dr. David Sparks			Date of Receipt
	Mailing Address 131C W Galloway Rd			01 09 2008
	City	State	Zip Code	Transaction ID: 23040377
	Jonesborough	TN	37659-3558	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Associated Radiologists Inc		tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		1000.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 98 (check only one) X
	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	e name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Dr. Kenneth Schwartz Mailing Address 284 Guard Hill Rd			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23040379
	Bedford FEC ID number of contributing federal political committee.	C	10506-1055	Amount of Each Receipt this Period 1000.00
	Name of Employer Northern Metro Rad Assoc Receipt For: Primary General Other (specify) ▼	, · · · · ·	tic Radiologist e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Mitchel Kim Mailing Address 8228 N Pelican Ln			Date of Receipt 0 1 0 9 2 0 0 8
	City	State	Zip Code	Transaction ID: 23040385
	River Hills	WI	53217-2056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Wisconsin Radiology Speci- alists, S.C.	,	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. Bradford Yeager			Date of Receipt
	Mailing Address 3752 Crest View Drive	Э		0 1 0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23040387
	Allentown	PA	18103-6150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Medical Imaging of Lehigh Valley, PC	 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .			1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 98 (check only one) X	
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) Dr. James Newcomb Mailing Address 1425 Princeton Ct			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Allentown FEC ID number of contributing	State PA	Zip Code 18104-2247	Transaction ID: 23040388 Amount of Each Receipt this Period 365.00	
Receipt For: Primary Other (specify) General	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼		
Full Name (Last, First, Middle Initial) Dr. Michael Votruba Mailing Address PO Box 151			Date of Receipt 0 1 0 9 2 0 0 8	
City	·			
Ada FEC ID number of contributing	C	49301-0151	Amount of Each Receipt this Period 365.00	
Name of Employer Kent Radiology, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 365.00]	
Full Name (Last, First, Middle Initial) Dr. David Butler			Date of Receipt	
Mailing Address St Lukes Hospital 232 S Woods Mill F	Rd Ste 110 East	t .	01 09 7 2008	
City <u>Chesterfield</u>	State MO	Zip Code	Transaction ID: 23040391	
FEC ID number of contributing federal political committee.	C	63017-3485	Amount of Each Receipt this Period 250.00	
Name of Employer Radiation Oncology Consul- tants of W. C Receipt For:	- ' '	n n Oncologist e Year-to-Date ▼		
Primary General Other (specify) ▼	Aggregate	250.00		
SUBTOTAL of Receipts This Page (optional	al)		980.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 98 (check only one) X 11a
A or	ny information copied from such Reports and strong for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	ciation		
۱.	Full Name (Last, First, Middle Initial) Dr. Steven DePrima Mailing Address 430 Rovino Ave			Date of Receipt
		•		01 09 2008
	City Coral Gables	State FL	Zip Code 33156-4261	Transaction ID: 23040393 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2000.00
	Name of Employer Self-employed	Occupation Diagnostic	c Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 2000.00	
	Full Name (Last, First, Middle Initial) Dr. Roma Gumbs			Date of Receipt
	Mailing Address 13716 N Gate Dr	01 09 2008		
	City	State	Zip Code	Transaction ID: 23040394
	Silver Spring FEC ID number of contributing federal political committee.	C	20906-2212	Amount of Each Receipt this Period 365.00
	Name of Employer Howard University Hospital	Occupation Diagnostic	c Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 365.00	
. –	Full Name (Last, First, Middle Initial) Dr. David Malamed			Date of Receipt
	Mailing Address Phoenixville Hospital 140 Nutt Rd			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Phoenixville	State PA	Zip Code 19460-3900	Transaction ID: 23040395 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13400 3300	365.00
	Name of Employer University of PA	Occupation Diagnostic	c Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 365.00	
	SUBTOTAL of Receipts This Page (optional) .			2730.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11		
or for commercial purposes, other than using the	Statements may not be sold or used by any person are name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation			
Full Name (Last, First, Middle Initial) Dr. Charles Tate, III		Date of Receipt		
Mailing Address 1090 SW 15th St City	State Zip Code	0 1 0 9 2 0 0 8 Transaction ID: 23040396		
Boca Raton	FL 33486-6858	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Radiologists of N. Ft. La- uderdale, PA Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Dr. Richard Menghetti		Date of Receipt		
Mailing Address Atlantic Medical Imaç 401 Bethel Rd	ging	01 09 7 7 7 7		
City	·			
Somers Point	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Department of Medical Ima- ging	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Mark Klein		Date of Receipt		
Mailing Address Washington Radiolog 2141 K St NW Ste 90	00	01 09 7 2008		
City	State Zip Code	Transaction ID: 23040398		
Washington FEC ID number of contributing federal political committee.	DC 20037-1810	Amount of Each Receipt this Period 250.00		
Name of Employer Washington Radiology Assoc	Occupation Diagnostic Radiologist			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General Other (specify) ▼	250.00			
SUBTOTAL of Receipts This Page (optional)		1500.00		
TOTAL This Period (last page this line number	<u> </u>			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	ny information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations	Statements may not be sold or used by any perse name and address of any political committee to station	son for the purpose of soliciting contributions to solicit contributions from such committee.
. ∠ . .	Full Name (Last, First, Middle Initial) Dr. James Bronk Mailing Address 50 El Monte Way		Date of Receipt
	City Napa	State Zip Code CA 94558-3952	Transaction ID: 23040405 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Self Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Paul Lampert Mailing Address 6421 E Telegraph St		Date of Receipt 0 1 0 9 2 0 0 8
	City	State Zip Code	Transaction ID: 23040406
	Yuma FEC ID number of contributing federal political committee.	AZ 85365-1121	Amount of Each Receipt this Period 1000.00
	Name of Employer MDIG	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Dr. Erik Kilgore	1	Date of Receipt
	Mailing Address Vancouver Radiologis 505 NE 87th Ave Ste	ts PC LL50	01 09 2008
	City Vancouver	State Zip Code WA 98664-4899	Transaction ID: 23040408 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Vancouver Radiologists PC	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .		1750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any persor the name and address of any political committee to s sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Ronald Ruff		Date of Receipt
Mailing Address Mountain Medical 5444 S Green St		0 1 0 9 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040410
<u>Murray</u>	UT 84123-5632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mountain Medical Physican	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Donald Harper		Date of Receipt
Mailing Address 1619C Chatham Av	/e	0 1 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 23040411
Tybee Island	GA 31328-8712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer South Coast Medical Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Mark Malley		Date of Receipt
Mailing Address Imaging for Womer 630 NW Englewood		01 09 2008
City <u>Kansas City</u>	State Zip Code MO 64118-3973	Transaction ID: 23040412 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Imaging for Women LLC	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	ıl)	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Benorts an	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 16 / 98 (check only one) X 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Gary Rose		Date of Receipt
Mailing Address 9706 Chilcott Mano	r Way	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040414
<u>Vienna</u>	VA 22181-5400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Washington Radiology Asso-	Occupation Diagnostic Radiologist	
<u>ciate</u> Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Edward Lipsit		Date of Receipt
Mailing Address Washington Radiology 2141 K St NW Ste 9		M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
City	State Zip Code	Transaction ID: 23040416
Washington	DC 20037-1810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Washington Radiology Assoc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Peter Dunner		Date of Receipt
Mailing Address 3022 Williams Dr S	te 104	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040419
<u>Fairfax</u>	VA 22031-4600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Washington Radiology Asso- ciates, P.C.	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	250.00	
		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 98 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	ne name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kirsten A. Hanson Mailing Address 1031 Towlston Rd City McLean FEC ID number of contributing federal political committee. Name of Employer Washington Radiology Associates, PC Receipt For: Primary General Other (specify)		tic Radiologist e Year-to-Date ▼ 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Alexis Kladakis Mailing Address 8557 Doveton Cir City Vienna FEC ID number of contributing federal political committee.	State VA	Zip Code 22182-3779	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Washington Radiology Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	_, · _ · _	n tic Radiologist e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. lan Peterkin Mailing Address 2902 Oak Shadow D	r		Date of Receipt 0 1 0 9 2 0 0 8
City Oak Hill FEC ID number of contributing	State VA	Zip Code 20171-4200	Transaction ID: 23040452 Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer Washington Radilogy Assoc	Occupatio	n tic Radiologist	230.00
Receipt For: Primary General Other (specify) ▼	_ ' 	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

ITEMIZE Any informat	JLE A (FEC Form 3X) D RECEIPTS ion copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any person	FOR LINE NUMBER: PAGE 18 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11 on for the purpose of soliciting contributions
or for comme	ercial purposes, other than using the of F COMMITTEE (In Full) an College of Radiology Associa	name and add	dress of any political committee to	solicit contributions from such committee.
Full Name Dr. Ramin Mailing A				Date of Receipt
011		01-1-	7'- 0-1-	01 09 2008
City <u>Potoma</u>	c	State MD	Zip Code 20854-1026	Transaction ID: 23040454 Amount of Each Receipt this Period
FEC ID n	umber of contributing olitical committee.	C	20034 1020	250.00
Name of Self-Emp	Employer lloyed	Occupatio Diagnost	n tic Radiologist	
	for: nary General ler (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name	e (Last, First, Middle Initial) Chopra			Date of Receipt
Mailing A	ddress 7206 Thrasher RD			01 09 7 7 7 7
City		State	Zip Code	Transaction ID: 23040481
	umber of contributing olitical committee.	C	22101-2030	Amount of Each Receipt this Period 250.00
Name of Self-Emp	Employer lloyed	Occupatio Diagnost	n tic Radiologist	
	or: nary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name	e (Last, First, Middle Initial) Kline			Date of Receipt
Mailing A	ddress 11964 N 135th Way			01 09 / Y Y Y Y Y
City	.1.	State	Zip Code	Transaction ID: 23040485
Scottsd: FEC ID n	are umber of contributing	AZ	85259-3655	Amount of Each Receipt this Period 250.00
federal po	olitical committee.	C		250.00
Name of Arizona N	Employer Medical Imaging	Occupatio Diagnost	n tic Radiologist	
	for: nary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercian College of Radiology Associations and the college of	d Statements may not be sold or used by any person the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Date of Descript
Dr. Jeffrey Moulton Mailing Address 5675 S Grape Ct		Date of Receipt M M D D Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040490
Greenwood Village	CO 80121-2116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Colorado Imaging Associat-	Occupation Diagnostic Radiologist	
es, P.C. Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Yuschok	1	Date of Receipt
Mailing Address 162 Laurelwood Ln		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040494
Ormond Beach	FL 32174-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Ethan Foxman		Date of Receipt
Mailing Address 1047 N Main St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23040496
West Hartford	CT 06117-2055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jefferson Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	-1	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology Associ	ciation	
Full Name (Last, First, Middle Initial) Dr. David Walker Mailing Address 8040 Woodpecker Trl		Date of Receipt
Mailing Address 8040 Woodpecker Trl City	State Zip Code	0 1 0 9 2 0 0 8 Transaction ID: 23040498
Jacksonville	FL 32256-7333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Mayo Clinic Jacksonville	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. James Rademacher		Date of Receipt
Mailing Address Rutland Regional Med 160 Allen St		01 09 7 2008
City	State Zip Code	Transaction ID: 23040502
Rutland	VT 05701-4595	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer VT Physicians Clinic	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Roy A. Holliday		Date of Receipt
Mailing Address 70 Sixth Avenue		01 09 7 2008
City	State Zip Code	Transaction ID: 23040504
Nyack	NY 10960-1612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Beth Israel Medical Center	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 2500.00	
Other (specify) ▼	2500.00	
SUBTOTAL of Receipts This Page (optional) .	·····	3365.00
TOTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	iation		
۷.	Full Name (Last, First, Middle Initial) Dr. Cody Cox			Date of Receipt
	Mailing Address 4702 111th St			01 09 7 2008
	City	State	Zip Code	Transaction ID: 23040507
	Lubbock	TX	79424-7359	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lubbock Diagnostic Radiol-	Occupation	n tic Radiologist	
	ogy Receipt For:	,	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Scott Burstein			Date of Receipt
	Mailing Address 4506 Oakwood Avenu	ie		01 09 7 9 2008
	City	State	Zip Code	Transaction ID: 23040509
	Downers Grove	<u>IL</u>	60515-2710	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Dupage Radiologists S.C.	Occupation Diagnosi	n tic Radiologist	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial) Dr. Mark Wetherly			Date of Receipt
•	Mailing Address 2074 Kinsmon Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23040510
	<u>Marietta</u>	GA	30062-8135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Clinica Las Americas/#101- &102	Occupation Diagnos	n tic Radiologist	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
Γ	CLIPTOTAL of December This Deep (entire-1)	1		1000.00
-	SUBTOTAL of Receipts This Page (optional) .			
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22/98 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the such that the such t	Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Christopher Jackson		Date of Receipt
Mailing Address 549 Hawthorne Woo	ds Dr	01 09 7 2008
City	State Zip Code	Transaction ID: 23040512
<u>Eagan</u>	MN 55123-3060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St Paul Radiology PA	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Pollock		Date of Receipt
Mailing Address Minneapolis Radiolo 3366 Oakdale Ave N	Ste 604	01 16 2008
City	State Zip Code	Transaction ID: 23092199
<u>Minneapolis</u>	MN 55422-2972	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Minneapolis Radiology Ass- oc	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Huss		Date of Receipt
Mailing Address 4838 W Corsican Pi	ne Dr	01 16 2008
City	State Zip Code	Transaction ID: 23092508
<u>Appleton</u>	WI 54913-6509	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Appleton	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	1	1000.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 98 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American College of Radiology A	and Statements may not be sold or used by any personing the name and address of any political committee to Association	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George Gentry		Date of Receipt
Mailing Address 6218 North Suffo	olk Drive	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23092509
<u>Peoria</u>	IL 61615-2741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Anjum Shariff	I	Date of Receipt
Mailing Address 12666 Mason Fo	rest Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23092510
Saint Louis	MO 63141-7453	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Midwest Radiological Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. Tate Allen	I	Date of Receipt
Mailing Address 9319 S Indianapo	olis Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23092511
<u>Tulsa</u>	OK 74137-4854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mallinckrodt Institute of Rad	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	onal)	1615.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. Joseph G. Ciotola		Date of Receipt
Mailing Address 3 Backfield Cir		01 16 2008
City	State Zip Code	Transaction ID: 23092516
Sugarloaf	PA 18249-1034	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hazleton Radiology Associ-	Occupation	
ates	Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Dr. Stuart Braverman		Date of Receipt
Mailing Address 232 Constance Ln		01 16 2008
City	State Zip Code	Transaction ID: 23092517
Santa Barbara	CA 93105-3520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Santa Barbara Radiology Med Group, Inc	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Dr. Herman Flink		Date of Receipt
Mailing Address 6454 Dora Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23092518
Mount Dora	FL 32757-7064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	······	865.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 98 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	d Statements may not be sold or used by any per the name and address of any political committee ociation	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Noam Littman Mailing Address 2166 Moonlight Ct		Date of Receipt M
City <u>Menasha</u>	State Zip Code WI 54952-8908	Transaction ID: 23092519 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Associates of Fox Valley Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. W Foley Mailing Address Froedtert Hospital E 9200 W Wisconsin A		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23092523
Milwaukee	WI 53226-3522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Medical College of Wiscon- sin	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Timothy E. Moore	-	Date of Receipt
Mailing Address Univ of Nebraska Meges 981045 Nebraska Meges 1045 Nebraska Neb	edical Ctr	01 16 2008
City Omaha	State Zip Code NE 68198-0001	Transaction ID: 23092525 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Univ of Nebraska Medical Ctr	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	'	800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associa	ation	
Full Name (Last, First, Middle Initial) Dr. Eleanor Smergel		Date of Receipt
Mailing Address 315 Evans Ave City	State Zip Code	0 1 1 6 2 0 0 8 2 0 0 8
Haddonfield	NJ 08033-3807	Transaction ID: 23092526 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tenet Health Corp.	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Anthony Barone		Date of Receipt
Mailing Address 3459 Virginia Oaks Dr		01 16 2008
City	State Zip Code	Transaction ID: 23093174
<u>Oakton</u>	VA 22124-2429	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Lorenz Ramseyer		Date of Receipt
Mailing Address 11600 W Longhorn Trl		01 16 YYYYY 2008
City	State Zip Code	Transaction ID: 23093175
Drummond	OK 73735-1099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Assoc. of Enid	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number of	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 98 (check only one) X
An	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation		
	Full Name (Last, First, Middle Initial) Dr. Steven Walsh			Date of Receipt
	Mailing Address 2803 E Zuni Ct			01 16 2008
	City Sierra Vista	State AZ	Zip Code 85650-9654	Transaction ID: 23093176
	FEC ID number of contributing federal political committee.	C	03030-3004	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Diagnosti	n ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Drew Lambert	. 0		Date of Receipt
	Mailing Address 3311 S Massachusetts St			01 16 2008
	City State Zip Code			Transaction ID: 23093177
	Seattle FEC ID number of contributing federal political committee.	C	98144-4029	Amount of Each Receipt this Period 250.00
	Name of Employer Group Health Cooperative	Occupation Diagnosti	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. Norman Crocker			Date of Receipt
	Mailing Address 1387 S Hametown Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23093179
	Copley FEC ID number of contributing federal political committee.	ОН	44321-1831	Amount of Each Receipt this Period 250.00
	Name of Employer Radiology and Imaging Ser- vices, Inc.	_ ' 	ic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	UBTOTAL of Receipts This Page (optional)			750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 98 (check only one) X 11a
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associated	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)			Date of Descript
	Dr. Marvin Rawitch Mailing Address 24100 D El Toro Rd S	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 23094256
	Laguna Woods	CA	92637-3106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Marvin A. Rawitch, M.D., Inc. Receipt For: Primary General Other (specify)	, '	n cic Radiologist e Year-to-Date ▼ 250.00]
	Full Name (Last, First, Middle Initial) Dr. Yiu-Kai Aaron Fu Mailing Address 13028 7th Ave NW			Date of Receipt
	City Seattle	State WA	Zip Code 98177-4243	Transaction ID: 23094262 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Radia, Inc.	Occupatio Diagnost	n ic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00]
	Full Name (Last, First, Middle Initial) Dr. Donald Bittner			Date of Receipt
	Mailing Address UPMC Northwest 100 Fairfield Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Seneca	State PA	Zip Code 16346-2130	Transaction ID: 23094263 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Northwest Medical Centr	Occupatio Diagnost	n ic Radiologist	_
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 29 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
A.	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associa Full Name (Last, First, Middle Initial) Dr. Robert Rhodes, III Mailing Address 1041 Maple Ct City		dress of any political committee to	Date of Receipt Date of Receipt
	Athens FEC ID number of contributing federal political committee.	GA	30606-5746	Amount of Each Receipt this Period 250.00
	Name of Employer Athens Radiology Associates Receipt For: Primary General Other (specify) ▼	, <u> </u>	n ic Radiologist e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Jennifer Kottra Mailing Address 1820 W Stevanna Way City Flagstaff FEC ID number of contributing federal political committee. Name of Employer Northern Arizona Radiology Receipt For: Primary General	State AZ C Occupation Diagnost	Zip Code 86001-1159 n ic Radiologist e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 6 2 0 0 8 Transaction ID: 23094267 Amount of Each Receipt this Period 500.00
_ C.	Other (specify) Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 38 Lake Forest Dr	0 0	500.00	Date of Receipt 0 1 1 6 2 0 0 8
	City Richmond Heights FEC ID number of contributing federal political committee.	State MO	Zip Code 63117-1303	Transaction ID: 23094269 Amount of Each Receipt this Period 250.00
	Name of Employer Washington University Receipt For: ☐ Primary ☐ General Other (specify) ▼		n ic Radiologist e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 98 (check only one)
Any information copied from such Report for commercial purposes, other that	ports and Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiological	<u> </u>	,,,	
Full Name (Last, First, Middle Initia Dr. Douglas Wester, JR	ત્રી)		Date of Receipt
Mailing Address 2405 Coverno	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Huntsville	State A L	Zip Code 35801-2260	Transaction ID: 23106934 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3333.2233	500.00
Name of Employer Radiology Associates of Huntsville Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initia Dr. Joshua Abramowitz			Date of Receipt
Mailing Address 72 Saint Stephens School Rd City State Zip Code			01 22 2008
Austin	TX	78746-2524	Transaction ID: 23216941 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initia Dr. Michael Aronoff	ત્રી)		Date of Receipt
Mailing Address 9609 Tobrina	Ln		01 22 2008
City	State	Zip Code	Transaction ID: 23216944
<u>Austin</u>	TX	78759-7708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00	
SUBTOTAL of Receipts This Page (2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sta or for commercial purposes, other than using the normal NAME OF COMMITTEE (In Full) American College of Radiology Association	Use separate schedule(s) for each category of the Detailed Summary Page attements may not be sold or used by any person ame and address of any political committee to s	FOR LINE NUMBER: PAGE 31 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17 If or the purpose of soliciting contributions solicit contributions from such committee.		
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	for each category of the Detailed Summary Page	X 11a		
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	Detailed Summary Page	13 14 15 16 17		
or for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person	for the purpose of soliciting contributions		
or for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions colicit contributions from such committee.		
` '				
American College of Radiology Associa				
14	tion			
Full Name (Last, First, Middle Initial) Dr. Sarah Avery		Date of Receipt		
Mailing Address 120 Birnam Wood Ct	01 22 2008			
City	State Zip Code	Transaction ID: 23216945		
Austin	TX 78746-4500	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc-	Occupation Diagnostic Radiologist	-		
iation Receipt For:	Aggregate Year-to-Date ▼	-		
Primary General	Aggregate rear-to-bate •			
Other (specify) ▼	1000.00			
Full Name (Last, First, Middle Initial) Dr. William Banks		Date of Receipt		
Mailing Address 10909 Range View Dr	Mailing Address 10909 Range View Dr			
City	State Zip Code	Transaction ID: 23216946		
Austin	TX 78730-3569	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist			
Receipt For:	Aggregate Year-to-Date ▼	1		
Primary General				
Other (specify) ▼	1000.00			
Full Name (Last, First, Middle Initial) Dr. Lori Barr		Date of Receipt		
Mailing Address Austin Radiological Asso 10900 Stonelake Blvd St	oc te 250	01 22 2008		
City	State Zip Code	Transaction ID: 23216947		
Austin	TX 78759-5873	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Austin Radiological Assoc	Occupation Diagnostic Radiologist	1		
Description Company	Aggregate Year-to-Date ▼	1		
Receipt For: Primary General Other (specify) ▼	1000.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 98 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and the commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Hillel Ben-Avi Mailing Address 4501 Spanish Oak Tr City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)	State Zip Code TX 78731-5217 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Bradley Brenner Mailing Address Austin Radiological A 10900 Stonelake Blvo City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Lauren Brown Mailing Address Austin Radiological A PO Box 4099 City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For:	Ssociates State Zip Code TX 78765-4099 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line numbe		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 98 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	ciation		
Full Name (Last, First, Middle Initial) Dr. Chris Butschek			Date of Receipt
Mailing Address Austin Radiological As	SSOC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23216951
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer	Occupatio	n	\dashv
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1000.00]
Full Name (Last, First, Middle Initial) Dr. Gregory Connor	1		Date of Receipt
Mailing Address 2909 Cherry Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23216952
Austin	TX	78703-2821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Lawrence Conrad			Date of Receipt
Mailing Address Austin Radiological Astronomy 10900 Stonelake Blvd	ssoc Ste 250		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23216953
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	7
Receipt For:	, ' 	e Year-to-Date ▼	7
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional) .			3000.00

SCHEDULE A (FEC ITEMIZED RECEIPT		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 98 (check only one) X
Any information copied from sur or for commercial purposes, oth	ch Reports and Statements maner than using the name and ac	ay not be sold or used by any perso ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (Ir American College of Ra	,		
Full Name (Last, First, Midd Dr. Newell Dutton	le Initial)		Date of Receipt
Mailing Address 3400 St	ratford Hills Lane		01 22 7 2008
City	State	Zip Code	Transaction ID: 23216955
Austin	TX	78746-4687	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	ing C		1000.00
Name of Employer Austin Radiological Associates	Occupati Diagnos	on stic Radiologist	
Receipt For:		te Year-to-Date ▼	
Primary Gen Other (specify) ▼		1000.00	
Full Name (Last, First, Midd Dr. David Feldman	le Initial)		Date of Receipt
10900 S	Radiological Assoc Stonelake Blvd Ste 250	01 22 2008	
City	State	Zip Code	Transaction ID: 23216956
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	C		1000.00
Name of Employer Austin Radiological Association	Occupati Diagnos	on stic Radiologist	
Receipt For:		te Year-to-Date ▼	
Primary Gen Other (specify) ▼		1000.00	
Full Name (Last, First, Midd Dr. Thomas Fletcher	le Initial)		Date of Receipt
Mailing Address 2507 Az	rtec Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23216957
Austin	TX	78703-2301	Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.	ing C		1000.00
Name of Employer Austin Radiological Association		stic Radiologist	
Receipt For:		te Year-to-Date ▼	
Primary Gen Other (specify) ▼	eral	1000.00]
CURTOTAL of Desciots This	Page (optional)		3000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	parate schedule(s) a category of the d Summary Page	FOR LINE NUMBER: PAGE 35 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sole e name and address of any	d or used by any perso y political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ciation		
Full Name (Last, First, Middle Initial) Dr. David Goldblatt			Date of Receipt
Mailing Address PO Box 4099			$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
City	State Zip Co		Transaction ID: 23216958
Austin	TX 78765	5-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Radiologist		
Receipt For:	Aggregate Year-to-Da	ate V	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Mark Gray	1		Date of Receipt
Mailing Address 3007 Stratford Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Co	ode	Transaction ID: 23216959
Austin	TX 78746	6-4650	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Gunlock			Date of Receipt
Mailing Address 2604 Shire Ridge Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Co	ode	Transaction ID: 23216963
Austin	TX 78732	2-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiolo	ogist	
Receipt For:	Aggregate Year-to-Da	ate V	
Primary General Other (specify) ▼		1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (ITEMIZED REC		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 98 (check only one) X
or for commercial purpos NAME OF COMMIT	ses, other than using the name	and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	ustin Radiological Assoc		Date of Receipt
	O Box 4099	Charles 7th Code	01 22 2008
City Austin		State Zip Code TX 78765-4099	Transaction ID: 23216964 Amount of Each Receipt this Period
FEC ID number of co	ontributing		1000.00
Name of Employer Austin Radiological A iates Receipt For: Primary Other (specify)	General A	ecupation adiologist ggregate Year-to-Date ▼	
Full Name (Last, Firs Dr. Ronald Hoelscher Mailing Address 46	t, Middle Initial)		Date of Receipt
City		State Zip Code	01 22 2008
Austin		TX 78746-1642	Transaction ID: 23216965 Amount of Each Receipt this Period
FEC ID number of confederal political comm	ontributing	75740 1042	1000.00
Name of Employer Austin Radiological A	Assoc. Oc	ecupation agnostic Radiologist	
Receipt For: Primary Other (specify)	General	ggregate Year-to-Date ▼ 1000.00	
Full Name (Last, Firs	t, Middle Initial)		Date of Receipt
Mailing Address 14	104 Wild Cat Holw		01 22 2008
City		State Zip Code	Transaction ID: 23216966
Austin		TX 78746-3622	Amount of Each Receipt this Period
FEC ID number of co federal political comn			1000.00
Name of Employer Austin Radiological A iates		ccupation adiologist	
Receipt For: Primary Other (specify)	General	ggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipt	s This Page (optional)		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation	
Full Name (Last, First, Middle Initial) Dr. Barry Horowitz Mailing Address 2020 Cerca Viejo Way	,	Date of Receipt
City	State Zip Code	0 1 2 2 2 0 0 8 Transaction ID: 23216967
Austin	TX 78746-7384	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Connie Hsu		Date of Receipt
Mailing Address Austin Radiological As 10900 Stonelake Blvd	Ste 250	01 22 7 2008
City	State Zip Code	Transaction ID: 23217308
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Kent Ibanez		Date of Receipt
Mailing Address 3701 Josh Ln		01 22 7 2008
City	State Zip Code	Transaction ID: 23217309
Austin	TX 78730-1513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Ass	sociation	
Full Name (Last, First, Middle Initial) Dr. Ravi Jhaveri		Date of Receipt
Mailing Address Austin Radiologica 10900 Stonelake B	l Assoc	01 22 2008
City	State Zip Code	Transaction ID: 23217310
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation	
iates Receipt For:	Diagnostic Radiologist Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Charles E. Johnson	L	Date of Receipt
Mailing Address 10900 Stonelake B	lvd Ste 250	M M / D D / Y Y Y Y Y Y Y Y Z 2 0 0 8
City	State Zip Code	Transaction ID: 23217311
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Karnaze		Date of Receipt
Mailing Address PO Box 5749		M M / D D / Y Y Y Y Y O D D / Y 22 2008
City	State Zip Code	Transaction ID: 23217312
Austin	TX 78763-5749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)	3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology As	<u> </u>	arooo or ary pointed committee to	COLOR CONTRIBUTION CONTRIBUTION
Full Name (Last, First, Middle Initial) Dr. John Kish			Date of Receipt
Mailing Address 3608 Travis Count	ry Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78735-6106	Transaction ID: 23217313 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00	1000.00
Name of Employer Austin Radiological Association Receipt For:		n ic Radiologist Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Lava			Date of Receipt
Mailing Address 4701 Ridge Oak D	r		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217314
Austin FEC ID number of contributing federal political committee.	C	78731-4723	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc-	Occupation	n	_
iates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Dr. John Leahy			Date of Receipt
Mailing Address Austin Radiologica 10900 Stonelake E			01 22 2008
City Austin	State TX	Zip Code 78759-5826	Transaction ID: 23217315
FEC ID number of contributing federal political committee.	C	76739-3626	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iation Receipt For:		n ic Radiologist e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	1000.00]
SUBTOTAL of Receipts This Page (option	al)		3000.00

SCHEDULE A (FEC Form	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 98 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American College of Radiolog	orts and Statements may not be sold or used by any perso using the name and address of any political committee to y Association	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial Dr. David Leake Mailing Address 6114 Mountain City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Associates Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial Dr. Marcus Lines Mailing Address 7 Ehrlich Road City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial Dr. Gael Joan Lonergan Mailing Address 2327 N Cuern City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)		Date of Receipt M M / D D / Y Y Y Y Y O 1 22 2008 Transaction ID: 23217318 Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (c	ptional)	3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 98 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	r not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation		
Full Name (Last, First, Middle Initial) Dr. John Manning			Date of Receipt
Mailing Address Austin Radiological Ass 10900 Stonelake Blvd S			01 22 2008
City	State	Zip Code	Transaction ID: 23217319
Austin	TX	78759-5826	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupation		
iation	, –	c Radiologist	_
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Michael Martin			Date of Receipt
Mailing Address 4201 Green Cliffs Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217320
Austin	TX	78746-1242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Anthony Masaryk			Date of Receipt
Mailing Address Austin Radiological Ass PO Box 4099	soc		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217321
Austin	TX	78765-4099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Radiologi		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42/98 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	<u> </u>		
Full Name (Last, First, Middle Initial) Dr. Curtis McClurg			Date of Receipt
Mailing Address 2607 Stratford Dr			01 22 2008
City Austin	State TX	Zip Code 78746-4622	Transaction ID: 23217322 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70710 1022	1000.00
Name of Employer Austin Radiological Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark McLelland	I		Date of Receipt
Mailing Address PO Box 4099			0 1 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State TX	Zip Code 78765-4099	Transaction ID: 23217324 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70703 4033	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. lan McLoughlin	 		Date of Receipt
Mailing Address 3120 Wild Canyon	Loop		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217325
Austin FEC ID number of contributing federal political committee.	C	78732-1948	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	I		3000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Gunar G. Mezaraups Mailing Address 2463 Westlake Dri City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)		Date of Receipt M M M / 22 / 2008 Transaction ID: 23217326 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Andrea Michel Mailing Address 10816 Broken Bro City Austin	ok Cove State Zip Code TX 78726-1904	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)	Occupation Radiologist Aggregate Year-to-Date 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. Robert Milman Mailing Address 6409 Williams Rid City Austin	lge Way State Zip Code TX 78731-2709	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Assoc. Receipt For:	Occupation Diagnostic Radiologist	1000.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nur	mbor only)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using t	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Elizabeth Moorehead Mailing Address 8206 Sandalwood C	COVE	Date of Receipt
City	State Zip Code	0 1 2 2 2 0 0 8 Transaction ID: 23217330
Austin	TX 78757-7522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. James Moyle	l	Date of Receipt
Mailing Address 200 W 32nd St		01 22 7 2008
City	State Zip Code	Transaction ID: 23217331
<u>Austin</u>	TX 78705-2304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Jason Naples		Date of Receipt
Mailing Address Austin Radiological PO Box 4700		01 22 7 2008
City	State Zip Code	Transaction ID: 23217332
Austin	TX 78765-4700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnostic Radiology	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional))	3000.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC ITEMIZED RECEIPT		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 98 (check only one) X
Any information copied from suc or for commercial purposes, oth NAME OF COMMITTEE (In American College of Ra	er than using the name and a Full)	ay not be sold or used by any persoddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middl Dr. David Nichols Mailing Address 4507 Riv	,		Date of Receipt
City Austin	State TX	Zip Code 78731-4518	Transaction ID: 23217333 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.	ng C		1000.00
Name of Employer Austin Radiological Associates Receipt For: Primary Other (specify) ▼	Aggrega	stic Radiologist te Year-to-Date ▼	
Full Name (Last, First, Middl Dr. Debra Pennington Mailing Address 2721 Ba	,		Date of Receipt 0 1 2 2 2 0 0 8
City	State	Zip Code	Transaction ID: 23217334
Austin	TX	78746-7988	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation		stic Radiologist	
Receipt For: Primary Gene Other (specify) ▼	00 0	tte Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middl Dr. F Pfeifer, II	e Initial)		Date of Receipt
Mailing Address PO Box	203396		0 1 2 2 2 2 0 0 8
City	State	Zip Code	Transaction ID: 23217336
Austin FEC ID number of contribution federal political committee.	ng C	78720-3396	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association	Occupat Diagno	ion stic Radiologist	
Receipt For: Primary Gene Other (specify) ▼		te Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This I	I Page (optional)		3000.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 98 (check only one) X 11a
or for comn	ation copied from such Reports and St nercial purposes, other than using the DF COMMITTEE (In Full) can College of Radiology Associa	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
City Austin FEC ID federal p	ne (Last, First, Middle Initial) ert Polson Address 2403 Camino Alto number of contributing political committee. f Employer Radiological Assoc-	State TX C		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u>iation</u> Receipt Pr			cic Radiologist e Year-to-Date ▼ 1000.00	
B. Dr. Russ	ne (Last, First, Middle Initial) sell Putnam Address 12243 Trautwein Rd			Date of Receipt 0 1 2 2 2 0 0 8
	number of contributing political committee.	State TX	Zip Code 78737-9365	Transaction ID: 23217338 Amount of Each Receipt this Period 1000.00
Austin Fiation Receipt Pr	f Employer Radiological Assoc- For: rimary General ther (specify) ▼		n cic Radiologist e Year-to-Date ▼	
Dr. Yvon	ne (Last, First, Middle Initial) ine Queralt Address Austin Radiological Ass	sociation		Date of Receipt
City Austin	10900 Stonelake Blvd S	Ste 100 State TX	Zip Code 78759-5826	Transaction ID: 23217339 Amount of Each Receipt this Period
federal p Name of Austin F	number of contributing political committee. f Employer Radiological Assoc-	Occupatio Diagnost	n iic Radiologist	1000.00
	For: rimary General ther (specify) ▼	· · · ·	e Year-to-Date ▼ 1000.00	
SUBTOTA	AL of Receipts This Page (optional)			3000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 98 (check only one) X 11a
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/</u>	Full Name (Last, First, Middle Initial) Dr. Andrew Reifsnyder Mailing Address Austin Radiological As			Date of Receipt
	10900 Stonelake Blvd			01 22 2008
	City	State	Zip Code	Transaction ID: 23217340
	Austin FEC ID number of contributing federal political committee.	C	78759-5826	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Assoc Receipt For: Primary General Other (specify) ▼	,	n tic Radiologist e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Christopher Richards Mailing Address Austin Radiological As	ssoc		Date of Receipt
	PO Box 4099		7' 0 1	01 22 2008
	City Austin	State TX	Zip Code 78765-4099	Transaction ID: 23217344
	FEC ID number of contributing federal political committee.	C	76765-4099	Amount of Each Receipt this Period 1000.00
	Name of Employer Austin Radiological Assoc- iates	Occupatio Radiolog		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00]
	Full Name (Last, First, Middle Initial) Dr. Dan Richardson			Date of Receipt
	Mailing Address 8616 Mendocino Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23217345
	Austin	TX	78735-1423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Austin Radiological Assoc- iation	, ' 	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
\[\]	SUBTOTAL of Receipts This Page (optional) .			3000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and address of any political committe	person for the purpose of soliciting contributions see to solicit contributions from such committee.
American College of Radiology Associated	ciation	
Full Name (Last, First, Middle Initial) Dr. Will Rodriguez		Date of Receipt
Mailing Address 1036 Liberty Park Dr	Apt 53	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: 23217346
Austin	TX 78746-7025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologists	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. John Rutledge		Date of Receipt
Mailing Address Austin Radiological A PO Box 4099	SSOC	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23217347
Austin FEC ID number of contributing federal political committee.	TX 78765-4099	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Rodney Schmidt		Date of Receipt
Mailing Address 1938 Holly Hill Dr Apt	. 13	01 22 2008
City	State Zip Code	Transaction ID: 23217348
Austin	TX 78746-7653	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 98 (check only one) X 11a 11b 11c 12
	d Statements may not be sold or used by any personant the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation	
Full Name (Last, First, Middle Initial) Dr. Rajeev Shah		Date of Receipt
Mailing Address 3711 Bridle Path, A		01 22 2008
City	State Zip Code	Transaction ID: 23217352
Austin	TX 78703-2004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Sandeep Shah		Date of Receipt
Mailing Address 6500 Champion Gra	andview Way Apt 71	01 22 7 2008
City	State Zip Code	Transaction ID: 23217353
Austin	TX 78750-8288	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc-	Occupation	
iates Receipt For:	Diagnostic Radiologist	_
Primary General	Aggregate Year-to-Date ▼	1
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Sheneman		Date of Receipt
Mailing Address 10703 Winchelsea	Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23217354
Austin	TX 78750-4039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
)	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any person the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Christopher Swanson Mailing Address 1104 Blanco St City Austin	State Zip Code TX 78703-4920	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. Gabrielle Theriault Mailing Address 8114 Talbot Ln City Austin FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General	State Zip Code TX 78746-4913 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Eugene Tong Mailing Address 9801 Stonelake Blv City Austin	Td Apt 138 State Zip Code TX 78759-6593	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	1000.00
SUBTOTAL of Receipts This Page (options	<u>al)</u>	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 98 (check only one)
Any information copied from such Reports are or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Dr. Anthony Trevino			Date of Receipt
Mailing Address 6712D Valburn Dr			01 22 2008
City Austin	State TX	Zip Code 78731-1802	Transaction ID: 23217360
FEC ID number of contributing federal political committee.	C	70731-1002	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Association Receipt For: Primary General Other (specify)		n cic Radiologist e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) DR Simon Trubek Mailing Address 4108 Firstview Dr			Date of Receipt
	01-1-	7'- 0-4-	01 22 2008
City Austin	State TX	Zip Code 78731-3904	Transaction ID: 23217361 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc-	Occupatio	n ic Radiologist	
iation Receipt For:		e Year-to-Date ▼	
Primary ☐ General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. Binh Truong			Date of Receipt
Mailing Address Austin Radiological PO Box 4099	l Associates		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217362
Austin FEC ID number of contributing federal political committee.	C	78765-4099	Amount of Each Receipt this Period 1000.00
Name of Employer Austin Radiological Assoc- iates		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00]
SUBTOTAL of Receipts This Page (optional	al)		3000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 98 (check only one) X 11a
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Assoc	iation		
Full Name (Last, First, Middle Initial) Dr. Christopher Vargo			Date of Receipt
Mailing Address Austin Radiological As 10900 Stonelake Blvd			01 22 7 2008
City	State	Zip Code	Transaction ID: 23217363
Austin	TX	78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n tic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. John Williams	1		Date of Receipt
Mailing Address 2902 Clearview Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217376
Austin	TX	78703-2847	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iates	Occupation Diagnost	n tic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) Dr. Mary Winsett	1		Date of Receipt
Mailing Address 3405 Northwood Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23217377
Austin	TX	78703-1004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Austin Radiological Assoc- iation	Occupation Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC FOITEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	y of the
Any information copied from such R or for commercial purposes, other the NAME OF COMMITTEE (In Full American College of Radiol	an using the name and address of any political	d by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Ini Dr. Charles Wiseman Mailing Address Austin Radi 10900 Stone	al) logical Assoc lake Blvd Ste 250	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23217378
Austin	TX 78759-5873	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Austin Radiological Associates Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00
Full Name (Last, First, Middle Ini Dr. Jody Barber Mailing Address 19445 Cour	·	Date of Receipt
		01 22 2008
City	State Zip Code	Transaction ID: 23217379
Bristol FEC ID number of contributing federal political committee.	IN 46507-8951	Amount of Each Receipt this Period 382.20
Name of Employer Radiology Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	382.20
Full Name (Last, First, Middle Ini Dr. Daniel Boll	al)	Date of Receipt
Mailing Address Radiology II PO Box 125	3	01 22 7 2008
City South Bend	State Zip Code IN 46624-1258	Transaction ID: 23217383
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	382.20
SUBTOTAL of Receipts This Page	(optional)	1764.40

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Brendle		Date of Receipt
Mailing Address 211 Highland Park	s Dr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23217384
Middlebury FEC ID number of contributing federal political committee.	IN 46540-9071	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Brett Carmichael		Date of Receipt
Mailing Address 17000 Barryknoll \	Way	0 1 2 2 2 2 0 0 8
City	State Zip Code IN 46530-6910	Transaction ID: 23217385
Granger FEC ID number of contributing federal political committee.	IN 46530-6910	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) DR Joel Cohen		Date of Receipt
Mailing Address The Goshen Healt 200 High Park Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Goshen	State Zip Code IN 46526-4810	Transaction ID: 23217386 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology Inc.	Occupation Radiation Oncologist	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (option	nal)	1146.60

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. David D'Andrea Mailing Address 51326 Amesburry Way City State Zip Code IN 46530-4829 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Perimany General Other (specify) ▼ State Zip Code IN 46545-2774 Full Name (Last, First, Middle Initial) Dr. Gerard Dupran, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 46545-2774 FEC ID number of contributing federal political committee. C Liy State Zip Code Nishawaka IN 46545-2774 FEC ID number of contributing federal political committee. C Liy State Zip Code Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ 382.20 Date of Receipt Inis Period Full Name (Last, First, Middle Initial) Dr. May Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46545-2784 Full Name (Last, First, Middle Initial) Dr. May Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46545-2499 FEC ID number of contributing federal political committee. C Lip Code Transaction ID: 23217390 Amount of Each Receipt Inis Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. C Lip Code Transaction ID: 23217390 Amount of Each Receipt Inis Period Aggregate Year-to-Date ▼ Diagnostic Radiology it Diagnostic Radiology it Diagnostic Radiology it Diagnostic Radiology it Diagnostic Rad	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 98 (check only one) X 11a 11b 11c 12
An NAME OF COMMITTEE (in Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. David D'Andriea Mailing Address 51326 Amesburry Way City Granger IN 46530-4829 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. City State Zip Code IN 46530-4829 Full Name (Last, First, Middle Initial) Dr. Gearnd Dynam, IR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 46545-2794 FEC ID number of contributing FEC ID number of cont	Any information poping from such Departs and Ct	atamanta ma	. 0	13 14 15 16
American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. David D'Andrea Mailing Address 51326 Amesburry Way City State Zip Code IN 46530-4829 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Prill Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 46545-2784 FEC ID number of contributing federal political committee. City State Zip Code IN 46545-2784 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ State Zip Code IN 46545-2784 Full Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 46545-2784 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Date of Receipt State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Date of Receipt State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Date of Receipt Aggregate Year-to-Date Date of Rece	any information copied from such Reports and States for commercial purposes, other than using the i	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) D. David D'Andrea Mailing Address 51326 Amesburry Way	` '	ation		
De De de Receipt Mailing Address 51326 Amesburry Way City Granger IN 46530-4829 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary Other (specify) ▼ State Zip Code IN 46530-4829 C C C C C C C C C C C C C				
City State Zip Code IN 46530-4829 FEC ID number of contributing federal political committee. Name of Employer Radiology, Ire. Diagnostic Radiologist IN 46545-2784 FEC ID number of contributing federal political committee. Name of Employer Radiology, Ire. Diagnostic Radiologist Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 45545-2784 FEC ID number of contributing federal political committee. Receipt For:				Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc.	Mailing Address 51326 Amesburry Way	,		
FEC ID number of contributing federal political committee. C			Zip Code	Transaction ID: 23217387
Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General IN 46545-2784 Transaction ID: 23217389 Amount of Each Receipt this Period FeC ID number of contributing federal political committee. Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Primary General Other (specify) ▼ Date of Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 23217390 Amount of Each Receipt this Period FeC ID number of contributing federal political committee. C Name of Employer Radiology, Inc. Name of Employer Radiology, Inc. Primary General Occupation Diagnostic Radiologist Receipt For: Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Amount of Each Receipt Inc. Aggregate Year-to-Date ▼ Amount of Each Receipt Inc. Amount of Ea	Granger	IN	46530-4829	Amount of Each Receipt this Period
Raciology, fric. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code Mishawaka IN 46545-2784 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46545-2784 Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Aggregate Year-to-Date ▼ Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		C		382.20
Receipt For: Primary	Name of Employer Radiology, Inc.			
Primary General Other (specify) ▼ 382.20 Full Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code Mishawaka IN 46545-2784 FEC ID number of contributing rederal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ 382.20 Date of Receipt M M M / D D D / 2 2 / 2 0 0 8 Transaction ID: 23217389 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Date of Receipt M M M / D D D / 2 2 / 2 0 0 8 Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt M M M / D D D / 2 2 / 2 0 0 8 Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt M M M / D D D / 2 0 0 8 Transaction ID: 23217390 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Parasaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 33217390 Amount of Each Receipt this Period				\dashv
Tull Name (Last, First, Middle Initial) Dr. Gerard Duprat, JR Malling Address 620 W Edison Rd Ste 110 City State Zip Code Mishawaka IN 46545-2784 FEC ID number of contributing federal political committee. Full Name (Last, First, Middle Initial) C 382.20 Date of Receipt Transaction ID: 23217389 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 23217389 Amount of Each Receipt this Period Bate of Receipt Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt State Zip Code IN 46514-2499 Date of Receipt Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: 23217389 Date of Receipt		Aggregate		1
Dr. Gerard Duprat, JR Mailing Address 620 W Edison Rd Ste 110 City State Zip Code IN 46545-2784 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ City State Zip Code IN 46545-2784 Amount of Each Receipt this Period 382.20 Date of Receipt From Jagnostic Radiologist Aggregate Year-to-Date ▼ State Zip Code Jagnostic Radiologist Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. C Jagnostic Radiologist Receipt For: Occupation Diagnostic Radiologist Receipt For: Occupation Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼			382.20	
Mailing Address 620 W Edison Rd Ste 110 City Mishawaka FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ Cocupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Pill Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City FEC ID number of contributing federal political committee. Cocupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Transaction ID: 23217389 Amount of Each Receipt this Period Date of Receipt Transaction ID: 23217389 Date of Receipt Transaction ID: 23217390 Date of Receipt Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period				Date of Receipt
Mishawaka IN 46545-2784 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	Mailing Address 620 W Edison Rd Ste 1	110		M M / D D / Y Y Y Y
Mishawaka FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Aggregate Year-to-Date ▼ C 382.20 Amount of Each Receipt this Period Date of Receipt Transaction ID: 23217390 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 23217390 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 332.20	City	State	Zip Code	Transaction ID: 23217389
Name of Employer Radiology, Inc. Receipt For:	Mishawaka	IN	46545-2784	
Receipt For: Primary General Other (specify) ▼		C		382.20
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code Elkhart IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 382.20	Name of Employer Radiology, Inc.			
Tull Name (Last, First, Middle Initial) Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ State Zip Code Transaction ID: 23217390 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 382.20				
Dr. Mary Dynes Mailing Address Elkhart General Hosp 600 East Blvd City State Zip Code IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D / 2 2 / 2 0 0 8 Transaction ID: 23217390 Amount of Each Receipt this Period 382.20	, –		382.20]
City State Zip Code Elkhart IN 46514-2499 FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ O1 22 2008 Transaction ID: 23217390 Amount of Each Receipt this Period 382.20				Date of Receipt
Elkhart IN 46514-2499 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Primary General Other (specify) ▼ Amount of Each Receipt this Period 382.20 Amount of Each Receipt this Period 382.20	a e.ee.aeep			
FEC ID number of contributing federal political committee. Name of Employer Radiology, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 382.20		State	Zip Code	Transaction ID: 23217390
Name of Employer Radiology, Inc. Receipt For: Primary Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date 382.20	Elkhart	IN	46514-2499	Amount of Each Receipt this Period
Radiology, Inc. Diagnostic Radiologist Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 382.20		C		382.20
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 382.20	Name of Employer Radiology, Inc.			7
Primary General Other (specify) ▼ 382.20	Receipt For:			7
		33 - 3		
				1146.60

SCHEDULE A (FEC Form ITEMIZED RECEIPTS Any information copied from such Repo	for each category of the Detailed Summary Page rts and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 56 / 98 (check only one) X
or for commercial purposes, other than NAME OF COMMITTEE (In Full) American College of Radiology	using the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Laurence Eckel Mailing Address 15822 Cedar F		Date of Receipt
		01 22 7 2008
City	State Zip Code	Transaction ID: 23217391
Granger FEC ID number of contributing federal political committee.	IN 46530-6516	Amount of Each Receipt this Period 382.20
Name of Employer Radiology Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Alan Engel		Date of Receipt
Mailing Address 50741 Ashford	Ln	01 22 7 7 7 7 7
City	State Zip Code	Transaction ID: 23217392
Granger	IN 46530-8423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. James Field		Date of Receipt
Mailing Address PO Box 1258		0 1 2 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City South Bend	State Zip Code IN 46624-1258	Transaction ID: 23217393 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (op	otional)	1146.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation	
Full Name (Last, First, Middle Initial) Dr. Thomas Fischbach		Date of Receipt
Mailing Address 50600 Fox TrI City	State Zip Code	0 1 2 2 2 2 0 0 8 Transaction ID: 23217397
Granger	IN 46530-8598	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Michael Grantham		Date of Receipt
Mailing Address 50591 Glenshire Ct		01 22 7 2008
City	State Zip Code	Transaction ID: 23217398
Granger	IN 46530-4978	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Alphonse Harding		Date of Receipt
Mailing Address 17120 Wheatridge Ct		01 22 7 2008
City	State Zip Code	Transaction ID: 23217399
Granger	IN 46530-9769	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (optional) .		1146.60
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Hill	ociation	Date of Receipt
Mailing Address 1531 Cedar Springs		0 1 2 2 2 0 0 8
City Mishawaka	State Zip Code IN 46545-4053	Transaction ID: 23217400 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Michael R. Holt Mailing Address 16980 Stonegate Co	nurt .	Date of Receipt
	ourt .	01 22 2008
City	State Zip Code	Transaction ID: 23217401
Granger FEC ID number of contributing federal political committee.	IN 46530-6947	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Allison Lamont		Date of Receipt
Mailing Address Radiology Inc PO Box 1258		01 22 7 2008
City	State Zip Code	Transaction ID: 23217404
South Bend FEC ID number of contributing federal political committee.	IN 46624-1258	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (optional)) .	1146.60
TOTAL This Period (last page this line numb	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 98 (check only one) X 11a
(Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation		
۷.	Full Name (Last, First, Middle Initial) Dr. Russell Midkiff			Date of Receipt
	Mailing Address 51930 Quail Valley Dr			01 22 2008
	City Granger	State IN	Zip Code 46530-8875	Transaction ID: 23217405 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	4000 0070	382.20
	Name of Employer Radiology, Inc.	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 382.20	
_ В.	Full Name (Last, First, Middle Initial) Dr. Pedro Miro	1		Date of Receipt
	Mailing Address 50957 Park Ridge Ct			01 22 2008
	City	State	Zip Code	Transaction ID: 23217406
	Granger FEC ID number of contributing federal political committee.	C	46530-4986	Amount of Each Receipt this Period 382.20
	Name of Employer Radiology, Inc	Occupation Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 382.20	
-).	Full Name (Last, First, Middle Initial) Dr. Eldon W. Olson			Date of Receipt
	Mailing Address 2006 Long Knife Cour	t		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 23217407
	Louisville FEC ID number of contributing federal political committee.	C	40207-1176	Amount of Each Receipt this Period 382.20
	Name of Employer Radiology, Inc.	Occupation Diagnost	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 382.20	
	SUBTOTAL of Receipts This Page (optional)			1146.60
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Assoc	iation	
Full Name (Last, First, Middle Initial) Dr. Mark Ormson Mailing Address 51194 Midlothian Ct		Date of Receipt
City	State Zip Code	0 1 2 2 2 0 0 8 Transaction ID: 23217415
Granger	IN 46530-9253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Samir Patel		Date of Receipt
Mailing Address 14208 Avery Point		01 22 7 2008
City	State Zip Code	Transaction ID: 23217416
Granger	IN 46530-4844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Karl Schultz		Date of Receipt
Mailing Address 620 W Edison Ste 100		01 22 7 2008
City	State Zip Code	Transaction ID: 23217417
Mishawaka	IN 46545-2784	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (optional)		1146.60
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 98 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Thomas Seiffert Mailing Address 620 W Edison Rd	Ste 110	Date of Receipt
City Mishawaka FEC ID number of contributing	State Zip Code IN 46545-2784	0 1 2 2 2 0 0 8 Transaction ID: 23217418 Amount of Each Receipt this Period 382.20
Receipt For: Primary Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 382.20	302.20
Full Name (Last, First, Middle Initial) Kevin Michael Small Mailing Address 307 E La Salle Av	enue Apt. 322L	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23217419
South Bend	IN 46617-4704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. Jerrold A. Van Dyke		Date of Receipt
Mailing Address Radiology Incorpo PO Box 1258	rated	01 22 7 2008
City <u>South Bend</u>	State Zip Code IN 46624-1258	Transaction ID: 23217423
FEC ID number of contributing federal political committee.	IN 46624-1258	Amount of Each Receipt this Period 382.20
Name of Employer Radiology, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 382.20	
SUBTOTAL of Receipts This Page (option	nal)	1146.60

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62/98 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Ass	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Dr. Katrina Vanderveen			Date of Receipt
Mailing Address 14635 Wheaton Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Granger	State IN	Zip Code 46530-4252	Transaction ID: 23217424 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000 1202	382.20
Name of Employer Radiology Inc.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 382.20	
Full Name (Last, First, Middle Initial) Dr. LeRoy Weaver, JR	I		Date of Receipt
Mailing Address 21339 Morse PI			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bristol	State IN	Zip Code 46507-9032	Transaction ID: 23217425
FEC ID number of contributing federal political committee.	C	40307-9032	Amount of Each Receipt this Period 382.20
Name of Employer Radiology Inc.	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 382.20]
Full Name (Last, First, Middle Initial) Dr. Richard Levine	<u> </u>		Date of Receipt
Mailing Address 8961 Valhalla Dr			01 24 2008
City Delray Beach	State FL	Zip Code 33446-9575	Transaction ID: 23254703
FEC ID number of contributing federal political committee.	C	33440-9373	Amount of Each Receipt this Period 500.00
Name of Employer West County Radiological Group		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional	al)		1264.40

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 98 (check only one) X
or for commercial purposes, other than using th	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation	
Full Name (Last, First, Middle Initial) Dr. Hector Ramirez, JR Mailing Address 7179 SE 94th Ln		Date of Receipt
City	State Zip Code	0 1 2 4 2 0 0 8 Transaction ID: 23254711
<u>Ocala</u>	FL 34472-9245	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology of Huntsville, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Frederic Vanbastelaer		Date of Receipt
Mailing Address Richmond Radiologis 35 S 8th St		01 24 7 2008
City	State Zip Code	Transaction ID: 23254712
Richmond	IN 47374-5441	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Richmond Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Jean Yi		Date of Receipt
Mailing Address 1711 Hibberd Lane		01 24 7 2008
City West Chester	State Zip Code PA 19380-6426	Transaction ID: 23254714 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 98 (check only one) X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and ado	rnot be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Dr. Mark Bisesi Mailing Address 3811 Devonshire Ln			Date of Receipt 0 1 2 4 2 0 0 8
	City	State	Zip Code	Transaction ID: 23254715
	Bloomington FEC ID number of contributing federal political committee.	C	47408-9699	Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	, ' 	c Radiologist Year-to-Date 250.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Valerie Jackson Mailing Address Indiana University Sch	n of Med		Date of Receipt
	550 University Blvd City	State	Zip Code	0 1 2 4 2 0 0 8 Transaction ID: 23254723
	<u>Indianapolis</u>	IN	46202-5149	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Indiana University Sch of Med	,	c Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Dr. Phan Huynh	1		Date of Receipt
	Mailing Address 4522 Pin Oak Ln			0 1 2 4 2 0 0 8
	City	State	Zip Code	Transaction ID: 23254724
	Bellaire	TX	77401-2612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Singleton Associates, P.A.	- t	c Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 98 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and S or for commercial purposes, other than using the state of the second seco	e name and add	not be sold or used by any persites of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Peter Giustra Mailing Address Pen Bay Medical Cent 6 Glen Cove Dr City Rockport	ter State ME	Zip Code 04856-4240	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Pen Bay X-Ray Associates Receipt For: Primary General Other (specify)	,	c Radiologist Year-to-Date ▼ 250.00	250.00
Full Name (Last, First, Middle Initial) Dr. James Zerner Mailing Address 7423 Greenbrier Dr City Dallas FEC ID number of contributing federal political committee. Name of Employer Baptist Med Ctr of OK Receipt For: Primary General	, ' <u> </u>	c Radiologist Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Heather Seymour Mailing Address Eastern Radiologists 9 Doctors Park City Greenville FEC ID number of contributing federal political committee.	Inc. State NC	Zip Code 27834-2801	Date of Receipt M M M / D D D / Y Y Y Y Y O 1 25 2008 Transaction ID: 23260116 Amount of Each Receipt this Period 500.00
Name of Employer Johns Hopkins Hosp-Johns Hopkins Receipt For: Primary General Other (specify) ▼	, ' 	c Radiologist Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Assoc	e name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Ross Barnett Mailing Address PO Box 27861 City Panama City FEC ID number of contributing federal political committee. Name of Employer R.W. Barnett Radiology, P.L.L.C. Receipt For: Primary General Other (specify)	State Zip Code FL 32411-7861 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Paul Connaughton Mailing Address Memorial Hospital 1400 E Boulder St City Colorado Springs FEC ID number of contributing federal political committee. Name of Employer Mallinkrodt Inst of Radio- logy Receipt For: Primary General Other (specify)	State Zip Code CO 80909-5599 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 365.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Peter Clive Mailing Address 2815 Bardamar Dr City Fort Gratiot FEC ID number of contributing federal political committee. Name of Employer X-Ray Associates of Port Huron, P.C. Receipt For: Primary General Other (specify)	State Zip Code MI 48059-3505 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		865.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation	
Full Name (Last, First, Middle Initial) Dr. Peter Bove Mailing Address 1165 Woodmere Dr		Date of Receipt
City	State Zip Code	0 1 2 5 2 0 0 8 Transaction ID: 23260120
Winter Park	FL 32789-2667	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Yale-New Haven Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Donald Frush		Date of Receipt
Mailing Address Duke Univ Med Ctr Box 3808		01 25 7 2008
City	State Zip Code	Transaction ID: 23260121
<u>Durham</u>	NC 27702-3808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Duke Univ Med Ctr	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Eva Smorzaniuk		Date of Receipt
Mailing Address 5140 Long Point Farm	n Drive	01 25 7 2008
City	State Zip Code	Transaction ID: 23260123
Oxford	MD 21654-1503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Delmarva Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 98 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	<u> </u>	,,	
Full Name (Last, First, Middle Initial) Dr. Marilyn Rix			Date of Receipt
Mailing Address 55 Audobon Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Auburn	State NH	Zip Code 03032-3109	Transaction ID: 23260126 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Associated Radiologists, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Howard Kahen	I		Date of Receipt
Mailing Address 10850 Alico Pass			01 25 2008
City	State	Zip Code	Transaction ID: 23260127
New Port Richey	<u>FL</u>	34655-4378	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Associates	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Vipin Bansal	 		Date of Receipt
Mailing Address Radiological Assoc 1500 Expo Pkwy	of Sacramento		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23264301
Sacramento FEC ID number of contributing	CA	95815-4227	Amount of Each Receipt this Period 350.00
federal political committee. Name of Employer	Occupation	n	_
Name of Employer Radiological Assoc. of Sa- cramento		ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
Other (specify)		350.00	
			850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 98 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		erson for the purpose of soliciting contributions e to solicit contributions from such committee.
American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. Garyun Blackmon		Date of Receipt
Mailing Address 6502 Kingbird Ct		0 1 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 23264302
Rocklin	CA 95765-5813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. George Bolton		Date of Receipt
Mailing Address 133 Yankton St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23264303
Folsom	CA 95630-8140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Breslau		Date of Receipt
Mailing Address Rad Assoc of Sacrame	ento	01 28 2008
City	State Zip Code	Transaction ID: 23264304
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Associates of Sacramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 98 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology As	<u>- </u>	2.000 to 4.1, pointed to	
Full Name (Last, First, Middle Initial) Dr. Christopher Chong			Date of Receipt
Mailing Address 27075 E El Macero	0		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City El Macero	State CA	Zip Code 95618-1006	Transaction ID: 23264398 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	93010-1000	350.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 350.00]
Full Name (Last, First, Middle Initial) Dr. Huu-Ninh Dao Mailing Address 2627 Rockwell Dr	l .		Date of Receipt
City	State	Zip Code	0 1 2 8 2 0 0 8 Transaction ID: 23264399
Davis	CA	95618-7664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Radiological Associates of Sacramento	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
Full Name (Last, First, Middle Initial) Dr. John De la Vega			Date of Receipt
Mailing Address Rad Assoc of Sac 1500 Expo Pkwy	ramento		01 28 2008
City Sacramento	State CA	Zip Code 95815-4227	Transaction ID: 23264400 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	93013-4227	700.00
Name of Employer Radiological Assoc. of Sa- cramento		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00]
SUBTOTAL of Receipts This Page (option	lal)		1400.00

Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Sacramento CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ General City State Zip Code Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Sacramento C Date Mo 1 Trans Mo 1 Trans Amou Aggregate Year-to-Date ▼ Mo 1 Trans C Date Mo 1 Trans Amou Date Mo 1 Trans Amou Aggregate Year-to-Date ▼ Mo 1 Trans Amou Date Mo 1 Trans Amou Date Aggregate Year-to-Date ▼ Mo 1 Trans Amou FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date Mailing Address 5249 Wyndham Oak Ln City State Zip Code Trans Trans	NE NUMBER: PAGE 71 / 98 only one) a 11b 11c 12 14 15 16
American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Scott Foster Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy State Zip Code CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento 1500 Expo Pkwy City Sacramento C C Name of Employer Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Aggregate Year-to-Date ▼ Date Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Sacramento CA 95815-4227 FEC ID number of contributing federal political committee. C Name of Employer Radiological Assoc of Sacramento Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ C C C C C C C C C C C C C	rpose of soliciting contributions ributions from such committee.
Dr. Scott Foster Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ FUII Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Trans Sacramento CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento Receipt For: Primary General Other (specify) ▼ Name of Employer Radiological Assoc of Sacramento Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95808-3472 FEC ID number of contributing federal political committee. CITY Fasting Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 FEC ID number of contributing federal political committee. CITY Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento Diagnostic Radiological Assoc of Sacramento Diagnostic Radiological Receipt For: Primary General Other (specify) ▼ Date Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 Amount State S	
City State Zip Code Sacramento CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Camento	of Receipt
Sacramento Sacramento CA Sate Sacramento CA Sate CA S	
FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento Diagnostic Radiologist Radiologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Trans Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Diagnostic Radiologist Radiologist Radiologist Sacramento City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing FeC ID number of contributing FeC ID number of contributing FeC ID number of committee. City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing FeC ID number of contributing FeC ID number of contributing FeC ID number of committee. Name of Employer Radiological Assoc. of Sa- Diagnostic Radiologist Radiologist Sacramento Diagnostic Radiologist Sacramento Radiological Rasoc. of Sa- Diagnostic Radiologist Radiologist Sacramento Sacramento Radiologist Sacramento Radiologist Radiologist Radiologist Radiologist Sacramento Radiologist Radiolog	saction ID: 23264404
Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code Sacramento FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Doccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ C C Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 FEC ID number of contributing federal political committee. C Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 FEC ID number of contributing federal political committee. C C Campichael CA PS608-3472 C C Coccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Trans Carmichael CA PS608-3472 C C C Name of Employer Radiological Assoc. of Sacoccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Occupation Diagnostic Radiologist C Date Month of Exployer CA PS608-3472 Amou	unt of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	350.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc of Sacramento Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Trans Amount Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Trans Aggregate Year-to-Date ▼ City State Zip Code Trans Aggregate Year-to-Date ▼ City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- Coccupation Diagnostic Radiologist	
Primary	
Tull Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City Sacramento CA Sacramento FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Diagnostic Radiologist Aggregate Year-to-Date Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address Date M Aggregate Year-to-Date Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address S249 Wyndham Oak Ln City Carmichael CA State Zip Code Trans CA M 0 1 Trans Carmichael C C Name of Employer Radiological Assoc. of Sa- Diagnostic Radiologist Aggregate Year-to-Date Trans Carmichael Date M 0 1 Trans Carmichael Date M Docupation Diagnostic Radiological Assoc. of Sa-	
Dr. Hani Greiss Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 Date M 0 1 Trans Amou Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 0 1 City State Zip Code CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- Name of Employer Radiological Assoc. of Sa- Diagnostic Radiologist Aggregate Year-to-Date ▼ Occupation Date M 0 1 Trans Occupation Place Aggregate Sealislogist Date M 0 1 Date M 0 1 Diagnostic Radiologist Aggregate Year-to-Date ▼ Occupation Date Date M 0 1 Date M 0 1 Date M 0 1 Diagnostic Radiologist Aggregate Year-to-Date ▼ Occupation Date Date Date M 0 1 Date	
City State Zip Code Trans Sacramento CA 95815-4227 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln FEC ID number of contributing federal political committee. Carmichael CA 95608-3472 Name of Employer Radiological Assoc. of Sacramento Carmichael CA 95608-3472 Name of Employer Radiological Assoc. of Sacramento Diagnostic Radiological Assoc. of Sacramento Diagnostic Radiological Padiological Padiologi	of Receipt
Sacramento CA 95815-4227 Amout FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Carpagnetic Padiological Date Occupation Date Trans Carmichael CA 95608-3472 Coccupation Diagnostic Radiological Assoc. of Sacramento Padiological Date Occupation Date Occupation Date Occupation Date Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacrameters Occupation Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Carmichael Trans Carmichael CA 95608-3472 Carmichael CA 95608-3472 Diagnostic Radiological Padiologist	saction ID: 23264405
Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Bull Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Carmichael Carmichael FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- Coccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Coccupation Coty Carmichael Carmicha	unt of Each Receipt this Period
Cramento Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ State Zip Code Carmichael Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- City Carmichael C C Coccupation Coc	350.00
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Carmichael Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- Carmichael Coccupation Diagrepatic Radiological Diagrepatic Radiological	
Dr. Patrick Harty Mailing Address 5249 Wyndham Oak Ln City State Zip Code Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa-	
City State Zip Code Trans Carmichael CA 95608-3472 FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa- Diagnostic Radiologist	of Receipt
Carmichael CA 95608-3472 Amou FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa-	
FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sa-	saction ID: 23264406
Name of Employer Radiological Assoc. of Sa- Diagnostic Radiologist	unt of Each Receipt this Period
Radiological Assoc. of Sa-	350.00
<u>oranono</u>	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 350.00	

TEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 72 / 98 (check only one) X 11a	
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation		
Full Name (Last, First, Middle Initial) Dr. Christopher Hoffman		Date of Receipt	
Mailing Address 1117 Teneighth Way		01 28 7 2008	
City	State Zip Code	Transaction ID: 23264407	
Sacramento	CA 95818-4024	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	294.00	
Name of Employer Self-Employed	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00		
Full Name (Last, First, Middle Initial) Dr. Jeffrey Kuo		Date of Receipt	
Mailing Address 2619 Mariella Dr		0 1 28 2008	
City	State Zip Code	Transaction ID: 23264408	
Rocklin	CA 95765-5618	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	350.00	
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) Dr. Hank Lin		Date of Receipt	
Mailing Address 1818 Moore Blvd Apt 1	146	0 1 28 2008	
City	State Zip Code	Transaction ID: 23264410	
<u>Davis</u>	CA 95618-7688	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	350.00	
Name of Employer Self-Employed	Occupation Diagnostic Radiologist		
Receipt For:	Aggregate Year-to-Date ▼	7	
Primary General Other (specify) ▼	350.00		
SUBTOTAL of Receipts This Page (optional)		994.00	
TOTAL This Period (last page this line number	· ·		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and Stator for commercial purposes, other than using the n	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	tion	
Full Name (Last, First, Middle Initial) Dr. Don Charles Loomer Mailing Address 1747 E Wallington Ln		Date of Receipt
City	State Zip Code	0 1 2 8 2 0 0 8 Transaction ID: 23264411
Fresno	CA 93730-3596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Vartan Malian		Date of Receipt
Mailing Address 100 Crane Meadow Ct		01 28 7 2008
City	State Zip Code	Transaction ID: 23264412
Roseville	CA 95661-4030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Mylon Marshall		Date of Receipt
Mailing Address 2201 Lassen PI		0 1 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 23264413
<u>Davis</u>	CA 95616-6604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number or		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(check dilly one)
or	for commercial purposes, other than using the	Statements may not be sold or used by any e name and address of any political commi	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation	
۸.	Full Name (Last, First, Middle Initial) Dr. Charles McDonnell, III		Date of Receipt
	Mailing Address 5436 Ridge Park Dr		01 28 2008
	City Loomis	State Zip Code CA 95650-7701	Transaction ID: 23264414 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 33030-1701	350.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.0	00
. —	Full Name (Last, First, Middle Initial) Dr. Narasimhachari Raghavan		Date of Receipt
	Mailing Address 3157 Oak Cliff Cir		01 28 2008
	City	State Zip Code	Transaction ID: 23264417
	Carmichael FEC ID number of contributing federal political committee.	CA 95608-4571	Amount of Each Receipt this Period 700.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.0	00
_	Full Name (Last, First, Middle Initial) Dr. Christopher Schaefer		Date of Receipt
	Mailing Address Radiological Assoc o 1500 Expo Pkwy	Sacramento	01 28 7 9 9 9
	City	State Zip Code	Transaction ID: 23264421
	Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 350.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	00 "
	IRTOTAL of Receipts This Page (optional)		1400.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	e name and address of any political c	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Albert Schraner Mailing Address 5300 Tufts St City Davis FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For:	State Zip Code CA 95616-7219 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M D D 28 2008 Transaction ID: 23264422 Amount of Each Receipt this Period 350.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. David Seidenwurm Mailing Address 2806 Hoffman Bluff V	0 0 0 0 0 0	Date of Receipt
City	State Zip Code	0 1 2 8 2 0 0 8 Transaction ID: 23264423
Carmichael FEC ID number of contributing federal political committee.	CA 95608-4522	Amount of Each Receipt this Period 350.00
Name of Employer Radiological Assoc. of Sacramento Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date	50.00
Full Name (Last, First, Middle Initial) Dr. Christopher Simopoulos	I	Date of Receipt
Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy	nento	0 1 2 8 2 0 0 8
City Sacramento	State Zip Code CA 95815-4227	Transaction ID: 23264426
FEC ID number of contributing federal political committee.	CA 93813-4227	Amount of Each Receipt this Period 350.00
Name of Employer Radiological Assoc. of Sacramento Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	50.00
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any person go the name and address of any political committee to a ssociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Steidler Mailing Address 1806 Vela Pl City Davis FEC ID number of contributing	State Zip Code CA 95616-6760	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
r Ec ib riamicel of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 350.00	350.00
Full Name (Last, First, Middle Initial) Dr. Calvin Wang Mailing Address Rad Assoc of Sac 1500 Expo Pkwy City Sacramento	oramento State Zip Code CA 95815-4227	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 350.00	350.00
Full Name (Last, First, Middle Initial) Dr. David Winfield Mailing Address Rad Assoc of Sac 1500 Expo Pkwy City Sacramento FEC ID number of contributing	State Zip Code CA 95815-4227	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 350.00	350.00
SUBTOTAL of Receipts This Page (option	nal)	1050.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	e name and address of any political committe	person for the purpose of soliciting contributions see to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dylan Witt	Jalion	Date of Receipt
Mailing Address 3636 Washoe St		0 1 28 2008
City	State Zip Code	Transaction ID: 23264434
<u>Davis</u>	CA 95616-5087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Michael Haseman	1	Date of Receipt
Mailing Address 227 Selby Ranch Rd	Apt 3	01 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23264437
Sacramento	CA 95864-5844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Sharon Dutton	1	Date of Receipt
Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy	ento	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23264439
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 78 / 98 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be name and address of	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associa	ation		
Full Name (Last, First, Middle Initial) Dr. Roger Gilbert			Date of Receipt
Mailing Address Rad Assoc of Sacrame 1500 Expo Pkwy	ento		0 1 2 8 2 0 0 8
City	State Zip	Code	Transaction ID: 23264440
Sacramento	CA 95	815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Radiological Assoc. of Sa-	Occupation	1	7
cramento Receipt For:	Radiation Onco		_
Primary General Other (specify) ▼	Aggregate Year-to	350.00	
Full Name (Last, First, Middle Initial) Dr. Susan Lee			Date of Receipt
Mailing Address Radiological Assoc of S 1500 Expo Pkwy	Sacramento		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip	Code	Transaction ID: 23264442
Sacramento	CA 95	5815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		700.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Onco	ologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Dr. Mark Logsdon			Date of Receipt
Mailing Address Rad Associates of Saci 1500 Expo Pkwy	ramento		01 28 7 2008
City		Code	Transaction ID: 23264503
Sacramento	<u>CA</u> 95	5815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		350.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Onco	ologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to	o-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)			1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to	for the purpose of soliciting contributions
American College of Radiology Associa	ation	
Full Name (Last, First, Middle Initial) Dr. Timothy Clark Mailing Address 324 Dupont Cir		Date of Receipt
City	State Zip Code	0 1 3 1 2 0 0 8 Transaction ID: 23379351
Greenville	NC 27858-6520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Eastern Radiologists	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Philip Pretter		Date of Receipt
Mailing Address 12325 Camberwell Ct		01 31 7 9 9 9
City	State Zip Code	Transaction ID: 23379352
Raleigh	NC 27614-8933	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Wake Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Gary Scott		Date of Receipt
Mailing Address Radiology Group 1722 Pine St Ste 203		01 31 7 2008
City	State Zip Code	Transaction ID: 23379353
Montgomery	AL 36106-1158	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
SUBTOTAL of Receipts This Page (optional)		1115.00
TOTAL This Period (last page this line number of		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 98 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	<u> </u>		
Full Name (Last, First, Middle Initial) Dr. Jerel Saito			Date of Receipt
Mailing Address 1300 Ala Pili Loop			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23379354
Honolulu FEC ID number of contributing federal political committee.	C	96818-1635	Amount of Each Receipt this Period 500.00
Name of Employer The Radiology Group	Occupation	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Tracy Yanke			Date of Receipt
Mailing Address 11965 E Calle De	Valle		0 1 3 1 2 0 0 8
City Scottsdale	State AZ	Zip Code 85255-6905	Transaction ID: 23379360
FEC ID number of contributing federal political committee.	C	03233-0903	Amount of Each Receipt this Period 500.00
Name of Employer Rush-Presbyterian St Luke-	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Dr. Brian Moffit			Date of Receipt
Mailing Address 501 Washington S	t Ste 510		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23379361
San Diego FEC ID number of contributing federal political committee.	CA	92103-2238	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Medical Group	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option:	1		1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 98 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	nd Statements may not be sold or used by any persong the name and address of any political committee to sociation	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Walter Eiseman Mailing Address Radiology Associa 500 Thomas More	tes of N Ky Pkwy Ste 5	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23379362
Crestview Hills	KY 41017-3471	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Radiology Associates of N. Kentucky Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00]
Full Name (Last, First, Middle Initial) Dr. Julie Timins Mailing Address 20 Footes Ln		Date of Receipt
City	State Zip Code	01 31 2008
Morristown	NJ 07960-6356	Transaction ID: 23379363 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Mark Goldshein		Date of Receipt
Mailing Address Associated Radiolo 8 E Pearl St	ogists PA	01 31 2008
City	State Zip Code	Transaction ID: 23379366
Nashua	NH 03060-9029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Associated Radiologists, P.A.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
CURTOTAL of Descript This Description	al)	2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any person the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Layne Clemenz Mailing Address 725 River Rd City Columbia FEC ID number of contributing federal political committee. Name of Employer Lexington Radiology Associates Receipt For:	State Zip Code SC 29212-8809 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Linda Nall Mailing Address LSU-Shreveport Me 1501 Kings Hwy		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Shreveport FEC ID number of contributing federal political committee. Name of Employer LSU-Shreveport Medical School Receipt For: Primary General Other (specify)	State Zip Code LA 71103-4228 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 300.00	Transaction ID: 23379370 Amount of Each Receipt this Period 300.00
Full Name (Last, First, Middle Initial) Dr. John Baehr, III Mailing Address Baptist Hospital 1000 W Moreno St City Pensacola FEC ID number of contributing federal political committee. Name of Employer Radiology Associates of Pensacola Receipt For: Primary General	State Zip Code FL 32501-2393 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼	300.00	3100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ciation	
Full Name (Last, First, Middle Initial) Dr. Todd Baird		Date of Receipt
Mailing Address 413 Stuart Cir Unit C		01 31 7 2008
City <u>Richmond</u>	State Zip Code VA 23220-3741	Transaction ID: 23380318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rhode Island Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Jessica Berliner	.1	Date of Receipt
Mailing Address 3 Welwyn PI		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23380319
Richmond	VA 23229-8111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Commonwealth Radiology	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Beskin	<u> </u>	Date of Receipt
Mailing Address 12218 Country Hills	Ter	01 31 2008
City	State Zip Code	Transaction ID: 23380320
Glen Allen FEC ID number of contributing federal political committee.	VA 23059-5339	Amount of Each Receipt this Period 250.00
Name of Employer Commonwealth Radiology PC	Occupation Neuroradiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per ne name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	American College of Radiology Asso	ciation	
	Pull Name (Last, First, Middle Initial) Dr. Valerie Brookeman Mailing Address 6217 Kershaw Dr		Date of Receipt
	City	State Zip Code	0 1 3 1 2 0 0 8 Transaction ID: 23380321
	Glen Allen	VA 23059-6979	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Commonwealth Radiology, P.C. Receipt For:	Occupation Diagnostic Radiologist	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Dr. Douglas Cook		Date of Receipt
	Mailing Address 217 Ampthill Rd		01 31 7 2008
	City	State Zip Code	Transaction ID: 23380322
	Richmond	VA 23226-2234	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Commonwealth Radiology	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Dr. David Disler		Date of Receipt
	Mailing Address Commonwealth Rad 1510 Willow Lawn D	ology PC · Ste 102	01 31 7 2008
	City	State Zip Code	Transaction ID: 23380323
	Richmond	VA 23230-3429	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer Commonwealth Radiology PC	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	CURTOTAL of Possints This Poss (entional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ation	
Full Name (Last, First, Middle Initial) Dr. David Ekey		Date of Receipt
Mailing Address Stuart Circle Hospital 5801 Bremo Rd	Olate 7's Onda	01 31 2008
City <u>Richmond</u>	State Zip Code VA 23226-1907	Transaction ID: 23380324 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Commonwealth Radiology, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Maurice Finnegan, JR		Date of Receipt
Mailing Address Commonwealth Radiol 1510 Willow Lawn Dr S		01 31 2008
City	State Zip Code	Transaction ID: 23380325
Richmond	VA 23230-3429	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Commonwealth RadiologyPC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Goldschmidt		Date of Receipt
Mailing Address 8947 Cherokee Rd		0 1 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 23380326
Richmond	VA 23235-1411	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Commonwealth Radiology PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	·	730.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16					
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Associations (In Full)	he name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions					
Full Name (Last, First, Middle Initial) Dr. Karen Killeen Mailing Address 3808 Dover Rd City Richmond FEC ID number of contributing federal political committee.	State VA	Zip Code 23221-2337	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Employer Commonwealth Radiology, P.C. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		c Radiologist Year-to-Date ▼ 250.00						
Full Name (Last, First, Middle Initial) Dr. Karsten Konerding Mailing Address 205 Cyril Ln City Richmond FEC ID number of contributing federal political committee. Name of Employer Commonwealth Radiology, P.C.	State VA C Occupation Diagnosti	Zip Code 23229-7740 c Radiologist	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr. Susan Leffler Mailing Address 4721 Trail Wynd Ct		Year-to-Date ▼ 250.00	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y					
City Glen Allen FEC ID number of contributing federal political committee. Name of Employer Commonwealth Radiology, P.C. Receipt For: Primary General Other (specify) ▼	_ ' 	Zip Code 23059-2532 c Radiologist Year-to-Date ▼ 250.00	Transaction ID: 23380333 Amount of Each Receipt this Period 250.00					
SUBTOTAL of Receipts This Page (optional)			750.00					

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 98 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
American College of Radiology Associ	ation		
Full Name (Last, First, Middle Initial) Dr. Jay Levine Mailing Address 1602 Hearthglow Ln			Date of Receipt
Tooz Heartinglow Life			01 31 2008
City	State	Zip Code	Transaction ID: 23380334
Richmond	VA	23233-4614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Commonwealth Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Alan Padgett			Date of Receipt
Mailing Address 12805 Saddleseat Pl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 23380335
Richmond	VA	23233-7687	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Univ of Virginia Hospital	Occupation Diagnost	ⁿ ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Dr. Brian Pacious			Date of Receipt
Mailing Address 32 Sumac Ln			01 31 7 2008
City	State	Zip Code	Transaction ID: 23380336
Richmond	VA	23229-7924	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Commonwealth Radiology, P.C.		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Ramesh Rao Mailing Address 4604 Jalbert Dr City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Glen Allen FEC ID number of contributing federal political committee.	VA 23060-6203	Amount of Each Receipt this Period 250.00
Name of Employer Commonwealth Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Lori Smithson Mailing Address 3331 Lady Marian C	Ct State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Midlothian FEC ID number of contributing federal political committee.	VA 23113-1180	Amount of Each Receipt this Period 250.00
Name of Employer Commonwealth Radiology Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Richard Szucs Mailing Address 3526 Crossings Wa	y	Date of Receipt
City Midlothian FEC ID number of contributing federal political committee.	State Zip Code VA 23113-6348	Transaction ID: 23380339 Amount of Each Receipt this Period 250.00
Name of Employer Commonwealth Radiology, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	1)	750.00

TOTAL This Period (last page this line number only)

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 98 (check only one) X
or for o	ormation copied from such Reports and S commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican College of Radiology Associ	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. Dr. Mai	Name (Last, First, Middle Initial) Mark Vaughn ling Address 6001 Britlyn Ct en Allen C ID number of contributing eral political committee. me of Employer d College of VA Hosp-Me-al C Dept For: Primary General	, '	Zip Code 23060-2428 n tic Radiologist e Year-to-Date ▼	Date of Receipt M M M
<u>Dr.</u>	Other (specify) Name (Last, First, Middle Initial) Gregg Weinberg ling Address 3600 Salles Ridge Ct		250.00	Date of Receipt 0 1 3 1 2 0 0 8
FEC fede Nar Cor P.C	C ID number of contributing eral political committee. The of Employer nmonwealth Radiology,	,	Zip Code 23113-2037 In tic Radiologist e Year-to-Date ▼ 250.00	Transaction ID: 23380341 Amount of Each Receipt this Period 250.00
Dr. Mai	chmond C ID number of contributing eral political committee.	State VA C	Zip Code 23221-3255	Date of Receipt M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u>P.C</u>	ne of Employer nmonwealth Radiology, b. c. Primary General Other (specify)	, ' 	n tic Radiologist e Year-to-Date ▼ 250.00	
SUBT	OTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 98 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any person the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lawrence Zarian Mailing Address 8200 W Amarillo B	lvd Apt 912	Date of Receipt 0 1 3 1 2 0 0 8
City Amarillo	State Zip Code TX 79124-2130	Transaction ID: 23381183 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Victory Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. Carl Hardin Mailing Address South Texas Radio		Date of Receipt
8401 Datapoint Dr City	Ste 600 State Zip Code	0 1 3 1 2 0 0 8 Transaction ID: 23381187
San Antonio FEC ID number of contributing federal political committee.	TX 78229-5907	Amount of Each Receipt this Period 2000.00
Name of Employer South Texas Radiology Gro- up Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Other (specify)	2000.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Judd	1	Date of Receipt
Mailing Address 10010 Kennerly Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 23381189
Saint Louis FEC ID number of contributing federal political committee.	MO 63128-2106	Amount of Each Receipt this Period 500.00
Name of Employer South County Radiologists, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	al)	2750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 98 (check only one)
Any information copied from such Reports or for commercial purposes, other than usi	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology A			
Full Name (Last, First, Middle Initial) Dr. Michael DeVenny			Date of Receipt
Mailing Address 3090 Yorktown D	r		01 31 2008
City Tuscaloosa	State AL	Zip Code 35406-2713	Transaction ID: 23381638 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00400 2710	250.00
Name of Employer The Radiology Clinic	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Bill Warren	I		Date of Receipt
Mailing Address UWMC Box 357115			01 31 YYYYY 2008
City Seattle	State WA	Zip Code 98195-7115	Transaction ID: 23381639
FEC ID number of contributing federal political committee.	C	90193-7113	Amount of Each Receipt this Period 250.00
Name of Employer University of Washington	Occupation	n ic Radiologist	7
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Michael George			Date of Receipt
Mailing Address 1620 John St S			01 31 2008
City	State	Zip Code	Transaction ID: 23381642
Salem FEC ID number of contributing federal political committee.	OR C	97302-5110	Amount of Each Receipt this Period 250.00
Name of Employer Univ of Iowa Hospitals & Clinics	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optic	ınal)		750.00

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 92/98
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to			on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
American College of Radiology Asso	ociation		
Full Name (Last, First, Middle Initial) Dr. William Herrington			Date of Receipt
Mailing Address 1110 Laurel PI			01 31 2008
City	State	Zip Code	Transaction ID: 23381644
Athens	GA	30606-5789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Athens Radiology Associat- es	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	•	625.00
TOTAL This Period (last page this line number only)	•	146935.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 98 (check only one) 11a 11b 11c 12 13 14 15 16 X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an	s may not be sold or used by any perso d address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Association		
Full Name (Last, First, Middle Initial) Vanguard Mailing Address PO Box 13750 City Stat	re Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Philadelphia PA FEC ID number of contributing federal political committee. Name of Employer Occur	19101 pation	Amount of Each Receipt this Period 983.23
Receipt For: Primary General Other (specify) ▼	egate Year-to-Date ▼ 983.23	Interest

SUBTOTAL of Receipts This Page (optional)	•	983.23
TOTAL This Period (last page this line number only)	•	983.23

	HEDULE B (FEC Form 3X) MIZED DISBURSEMENTS		I I I I I I I I I I I I I I I I I I I					NE NUMBER: PAGE 9 only one)							98
EMIZED DI	SBURSEMEN'	TS		category of the Summary Page			21b 27	22 28a	X	23 28b		24 28c	H	25 29	
	ed from such Reports											citing o	ontrik		3
NAME OF COM	rposes, other than usir	ig the name a	and addres	ss of any political	COII	HITHLU	ee to s	Olicit Cori	tribu	lions	ITOIII	Such	COMI	iiillee	
	ege of Radiology A	esociation													
7 interiodin com	sgc of fladiology /	33001411011													
Full Name (Last, Todd Akin For	First, Middle Initial) Congress									i on II Disbur		22519 ent	907		
								м 0 1	М	/ D	0 2	7	YYY	0 ŏ 8	Y
Mailing Address	PO Box 31222							0 1		L	ŲΖ			000	>
City St Louis			tate 10	Zip Code 63131				Amo	unt c	of Eac	h Di	isburs	emen	t this F	Peri
Purpose of Disbu	ırsement						-	1 L					10	0.000	0
						011									
Candidate Name Rep. Todd Aki					С	atego Type									
Office Sought:	χ House	Disbursem	ent For:	2008		ı ypt		-							
Jougin.	Senate		Primary	General											
	President		Other (spe	ecify)											
State: MO	District: 02														
, ,	First, Middle Initial)									-		2913 ⁻	103		
Lonestarpac								Date		isbur					
Mailing Address	PO Box 1000 H	lighway 259) South					0 ^M 1	М	/ D	07		ž	οŏε	3 ^Y
City			ate	Zip Code				Amo	unt c	of Eac	h Di	isburs	emen	t this F	Peri
Lone Star		T.	X	75668						-			21	500.0	Λ
Purpose of Disbu	rsement					011			-	-	-		۷.	300.0	U
Candidate Name					C	ateg									
						Тур	-								
Office Sought:	House	Disbursem	ent For:												
	Senate		Primary	General											
Ctoto	President		Other (spe	ecify)											
State:	District: First, Middle Initial)	Ь								_					
Storm Chasers										i on II Isbur		29139 ent	917		
Mailing Address	P.O. Box 237							0 ^M 1	М	/ D	07	′	Ý Ž	οŏε	3 Y
City Monticello		St IN	tate	Zip Code 47960				Amo	unt c	of Eac	h Di	isburs	emen	t this F	Peri
Purpose of Disbu	 irsement			17000	_								50	0.00	0
						011				-			•		
Candidate Name						atego Type									
Office Sought:	X House Senate	Disbursem F	ent For: Primary	General											
0	President		Other (spe	ecify)											
State: IN	District: 04	L													

Transaction ID: 22914701 Disbursement Disbursement For: State: AZ Disbursement Disb	TEMPER BIODURGEMENTS	Use separate schedule(s)	(check or	
NAME OF COMMITTEE (In Fulli) American College of Radiology Association Full Name (Last, First, Middle Initial) Giffords For Congress Mailing Address PO Box 12886 City State Zip Code AZ 85732 Purpose of Disbursement Candidate Name Rep. Gabrielle Giffords Office Sought: X House President State Zip Code Collego Office Sought: X House Candidate Name Candidate Name Candidate Name President State: AZ District: 03 Full Name (Last, First, Middle Initial) Leadership of Today & Tomorrow Mailing Address PO BOX 26641 City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement City State Zip Code CA 90026 Purpose of Disbursement Candidate Name Office Sought: X House Senate Primary General Prim	I EMIZED DISBURSEMENTS		21b	22 X 23 24 25
American College of Radiology Association Full Name (Last, First, Middle Initial) Giffords For Congress Mailing Address PO Box 12886 City State Zip Code Tucson AZ 85732 Purpose of Disbursement Candidate Name Rep. Cabrielle Ciffords Office Sought: X House Senate President Clay State Zip Code CA 90026 Purpose of Disbursement Candidate Name President State: CA District: 31 Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City State Zip Code City Senate President State: CA District: 31 Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City State Zip Code City Senate President Condidate Name Other (specify) ▼ Transaction ID: 22914701 Date of Disbursement this Peri Category/ Type Transaction ID: 22914701 Date of Disbursement this Peri Category/ Type Transaction ID: 22914701 Date of Disbursement this Peri Category/ Type Transaction ID: 22914701 Date of Disbursement this Peri Category/ Type Amount of Each Disbursement this Peri Category/ Type Office Sought: X House Senate President State: CA District: 31 Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City State Zip Code Category/ Type Office Sought: X House Senate President Cother (specify) ▼ State: CT District: 01	or for commercial purposes, other than using the nan			
Giffords For Congress Mailing Address PO Box 12886 City State Zip Code AZ 85732 Purpose of Disbursement Candidate Name Rep. Gabrielle Giffords Office Sought: House President Disbursement City State: AZ Disbursement For: 2008 X Primary General Disbursement Walling Address PO BOX 26641 City State: AZ Disbursement For: 2008 X Primary General Disbursement Tor: 2008 X Primary General Disbursement Tor	American College of Radiology Association	on		
City	,			Date of Disbursement
Tucson AZ 85732 Purpose of Disbursement Candidate Name Rep. Gabrielle Giffords Office Sought:	Mailing Address PO Box 12886			01 07 2008
Candidate Name Rep. Gabrielle Giffords Office Sought:		State Zip Code AZ 85732		Amount of Each Disbursement this Perio
Rep. Gabrielle Giffords Office Sought: X House Senate President District: 08 Full Name (Last, First, Middle Initial) Leadership of Today & Tomorrow Mailing Address PO BOX 26641 City State Zip Code CA 90026 Purpose of Disbursement Candidate Name Office Sought: X House President President Senate President State: CA District: 31 City Galestonbury CT 06033 Purpose of Disbursement City State Zip Code CA 90026 Primary General Other (specify) ▼ Transaction ID: 22914701 Date of Disbursement O11 Category/ Type Transaction ID: 22914701 Date of Disbursement this Perion Date of Disbursement Date of Date of Disbursement Date of Date of Disbursement Date of D	Purpose of Disbursement		011	1000.00
Senate President State: AZ District: 08 Full Name (Last, First, Middle Initial) Leadership of Today & Tomorrow Mailing Address PO BOX 26641 City State Zip Code CA 90026 Purpose of Disbursement Candidate Name Other (specify) ▼ State Zip Code CA 90026 President State: CA District: 31 Full Name (Last, First, Middle Initial) Category/ Type City Senate President State: CA District: 31 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City State Zip Code CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Amount of Each Disbursement this Perion CT 06033 Amount of Each Disbursement this Perion CT 06033 Full Name (Last, First, Middle Initial) Category/ Type City Glastonbury CT 06033 Amount of Each Disbursement CT 06033 Amount of Each Disbursement CT 06034 City CT 0603				
Full Name (Last, First, Middle Initial) Leadership of Today & Tomorrow Mailing Address PO BOX 26641 City State Zip Code LOS ANGELES CA 90026 Purpose of Disbursement Candidate Name Office Sought: X House Senate President State: CA District: 31 Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City Glastonbury CT 06033 Purpose of Disbursement Candidate Name City Category/ Type Office Sought: X House Senate Primary General Other (specify) ▼ Transaction ID: 22914701 Date of Disbursement this Perion Shousement this Perion Shousement this Perion Shousement Type Transaction ID: 22997862 Date of Disbursement Mailing Address 29 Ruff Circle City Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate President Shouse General Other (specify) ▼ State: CT District: 01 Transaction ID: 22997862 Date of Disbursement This Perion Shousement This Perion Shouse This Perion Shousement This Perion Shousement This Perion Shous	Senate >	C Primary General		
Date of Disbursement				Transaction ID: 22914701
City State Zip Code CA 90026 Purpose of Disbursement Candidate Name Office Sought: X House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City Glastonbury CT 06033 Purpose of Disbursement City Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate Primary General Other (specify) ▼ City Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate President Other (specify) ▼ State: CT District: 01 Disbursement For: 2008 Senate President Other (specify) ▼ State: CT District: 01	Leadership of Today & Tomorrow			Date of Disbursement
Unit Candidate Name Candidate Name Office Sought:	Mailing Address PO BOX 26641			01 07 2008
Candidate Name Office Sought:				Amount of Each Disbursement this Period
Office Sought:			011	5000.00
Senate	Candidate Name			
Full Name (Last, First, Middle Initial) Larson For Congress Mailing Address 29 Ruff Circle City State Zip Code Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate President State: CT District: 01 Transaction ID: 22997862 Date of Disbursement 0 1 M / D 1 D / Y 2 0 0 8 Amount of Each Disbursement this Period Category/ Type Office Sought: X House Senate President Other (specify) Other (specify)	Senate President	Primary General		
Larson For Congress Mailing Address 29 Ruff Circle City State Zip Code Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House President President State: CT District: 01 Date of Disbursement				Transaction ID: 22997862
City State Zip Code Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate President State: CT District: 01 O1 12 2008 Amount of Each Disbursement this Period Category/ Type Category/ Type Other (specify) ▼ State: CT District: 01	Larson For Congress			Date of Disbursement
Glastonbury CT 06033 Purpose of Disbursement Candidate Name Rep. John Larson Office Sought: X House Senate President State: CT District: 01 CT 06033 1000.00 1011 Category/ Type Category/ Type Other (specify) ▼	Mailing Address 29 Ruff Circle			01 12 2008
Candidate Name Rep. John Larson Office Sought: X House Senate President President State: CT District: 01 O11 Category/ Type Other (specify) Other (specify)				Amount of Each Disbursement this Period
Rep. John Larson Office Sought: X House Senate President State: CT District: 01 Disbursement For: 2008 X Primary General Other (specify) ▼			011	1000.00
Senate President State: CT District: 01 X Primary General Other (specify) ▼				
	Senate >	C Primary General		
SUBTOTAL of Dishursements This Page (optional) 7000.00				

			Use separate schedule(s)		FOR LINE (check onl			in.		PAGE 96/98			
	EMIZED DISBURSEMENTS	Detailed S	category of the Summary Page		È	21b 27	22 28a		23 28b	24 28	c $lacksquare$	25 29	
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												S
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology Association												
<u>/</u>	Full Name (Last, First, Middle Initial) Larson For Congress									22997 ement	7863		
	Mailing Address 29 Ruff Circle						0 ^M 1	M /	^D 1	^D 2	Y 2	ž o ŏ 8	3 ^Y
	City Glastonbury	State CT	Zip Code 06033				Amo	unt of	Each	Disbur			
	Purpose of Disbursement				01	1.					2	2500.0	0
	Candidate Name Rep. John Larson				ateg Typ	ory/ e							
	Senate President	ement For: Primary Other (spe	2008 X General cify)										
	State: CT District: 01 Full Name (Last, First, Middle Initial)									23109	9274		
	John D. Dingell For Congress Committee Mailing Address 607 14th Street N.W.						Date M 0 1	of Dis		ement 5	Y	ž 0 č 8	3 ^Y
	Suite 800	2											
	City Washington	State DC	Zip Code 20005				Amo	unt of	Each	Disbur			
	Purpose of Disbursement				01		L.		•		1	0.000	00
	Candidate Name Rep. John D. Dingell				ateg Typ	ory/ e							
	Senate President	ement For: Primary Other (spe	2008 X General cify) ▼										
	State: MI District: 15 Full Name (Last, First, Middle Initial) Northstar Leadership Pac									23109	9884		
	Mailing Address PO Box 28754						Dale М 0 1	M /	D 2	ement	Y	ž o ŏ 8	3 ^Y
	City St. Paul	State MN	Zip Code 55128				Amo	unt of	Each	Disbur	semer	nt this f	Perio
	Purpose of Disbursement	1411.4	55125		01	1					1	0.00	00
	Candidate Name			Ca	ateg Typ	ory/							
	Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General										

•	EC Form 3X)	Use sepa	arate schedule(s)	FOR LINE		/ 98
ITEMIZED DISBU	RSEMENTS	for each	category of the Summary Page	21b	22 X 23 24 25	
Any Information copied from	n such Reports and St	atements may n	nt he sold or used	d by any person	28a 28b 28c 29 for the purpose of soliciting contribution	ns :
or for commercial purposes	, other than using the r	name and addre	ss of any political	committee to so	olicit contributions from such committee)
NAME OF COMMITTE American College of	,	ation				
Full Name (Last, First, I					Transaction ID: 22522764	
Matheson For Cong	ress				Date of Disbursement	Y
	7 South 200 West ite A				01 25 7 200	8
City Salt Lake City		State UT	Zip Code 84101		Amount of Each Disbursement this	
Purpose of Disburseme	nt			011	2000.	00
Candidate Name Rep. James D. Math	neson			Category/ Type		
	House Disb Senate President	ursement For: Primary Other (spe	2008 X General ecify) ▼			
	rict: 02					
Full Name (Last, First, I Souder For Congres	,				Transaction ID: 22912494 Date of Disbursement	
Mailing Address P.	O. Box 40233				$ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ I & O \end{smallmatrix} \end{bmatrix} \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & O \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & O \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & I \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ I & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \\ Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y & Y \end{smallmatrix} } \ \ \underbrace{ \begin{smallmatrix} Y$	8 ^Y
City Fort Wayne		State IN	Zip Code 46804		Amount of Each Disbursement this	Period
Purpose of Disburseme	nt			011	2500.	00
Candidate Name Rep. Mark Souder				Category/ Type		
	House Disb Senate President	ursement For: X Primary Other (spe	2008 General			
	rict: 03					
Full Name (Last, First, I Souder For Congres	,				Transaction ID: 22912524 Date of Disbursement	
Mailing Address P.	O. Box 40233				01 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	8 ^Y
City Fort Wayne		State IN	Zip Code 46804		Amount of Each Disbursement this	Perio
Purpose of Disburseme	nt			011	1000.	00
Candidate Name Rep. Mark Souder				Category/ Type		
	House Disb Senate President	ursement For: Primary Other (spe	2008 X General ecify) ▼			
H						
	rict: 03					
		nal)		>	5500.	00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statem	for each category of the Detailed Summary Page (check onl 21b 27)	22 23 24 25 26 28a 28b 28c X 29 30b
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political committee to so	olicit contributions from such committee
American College of Radiology Association	ı	
Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. Box 27025		Transaction ID: 23596849 Date of Disbursement O 1
,	State Zip Code VA 23261-7025	Amount of Each Disbursement this Period 1424.52
Candidate Name	Category/ Type	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Bank Fees
State. District.		

SUBTOTAL of Disbursements This Page (optional)	•	1424.52
TOTAL This Period (last page this line number only)		1424.52